

**UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY**

SUBMIT IN TRIPPLICATE\*  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.  
NM - 7448

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Federal 15-21-2

9. WELL NO.  
1

10. FIELD AND POOL, OR WILDCAT  
Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Section 15-T21N-R2W

12. COUNTY OR PARISH 13. STATE  
Sandoval NM

**SUNDRY NOTICES AND REPORTS ON WELLS**

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL  GAS WELL  OTHER

2. NAME OF OPERATOR  
Benson Mineral Group, Inc.

3. ADDRESS OF OPERATOR  
3200 Anaconda Tower, 555 17th Street, Denver, CO 80202

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

1090' FSL and 1160' FEL, Section 15-T21N-R2W

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
7165' GR

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

- 1-4-79: Tracer survey run.
- 1-9-79: Set retainer (top 6176') and squeeze with 200 sacks cement.
- 1-10-79: Drill out cement and retainer to 6198'. Pressure test casing to 1000 psi for 5 minutes. OK. Perf 6186-96 with 2 shots per foot. Spot 250 gal acid.
- 1-11-79: Set packer at 6130'. Swab.
- 1-12-79: Swab. Trip out with tubing and packer.
- 1-13-79: Set bridge plug at 6150'. Pressure test bridge plug to 3500 psi. OK. Additional perfs: 6010-16; 6044-50; 6104-10; 6116-22 with 1 shot per foot. Frac with 2500 gal 10# gel pad, 15,000# 20-40 sand and 15,000 gal 10# gel. Second pad 2500 gal 10# gel. Pmp 14 ball sealers. 15,000# 20-40 sand and 15,000 gal 10# gel. Flush.
- 1-15-79: Swab.
- 1-16-79: Swab.
- 1-17-79: Swab.
- 1-18-79: Swab.

18. I hereby certify that the foregoing is true and correct

SIGNED *Paul C. Ellison*  
Paul C. Ellison

TITLE Production Manager

DATE January 19, 1979

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

DATE \_\_\_\_\_

3 1979