

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM - 7773

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal 23-21-5

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Section 23-T21N-R5W

12. COUNTY OR PARISH

Sandoval

13. STATE

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 ☐ GAS ☒
WELL 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

945' FSL and 810' FWL Section 23-T21N-R5W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

7204 GR

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) Set surface casing ☒

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☐

(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.)*

9-30-78: Spud 07:30 9-30-78. Drill to 102'. Set 7" casing at 96' GR with 50 sacks cement, circulate.

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

SIGNED Paul C. Ellison

TITLE Production Manager

DATE October 3, 1978

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

RECEIVED
DATE

OCT 6 1978

*See Instructions on Reverse Side

U. S. GEOLOGICAL SURVEY
DURANGO, COLO.