

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

SUBMIT IN DUPLICATE*

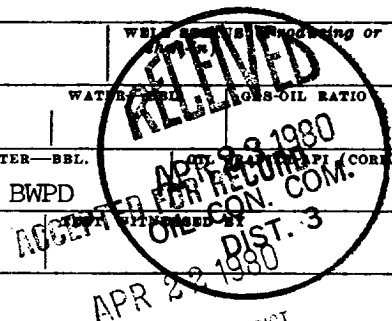
(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.5.**WELL COMPLETION OR RECOMPLETION REPORT AND LOG ***

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____						5. LEASE DESIGNATION AND SERIAL NO. NM 7012 ✓	
b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____						6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Benson Mineral Group, Inc. ✓						7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR 1726 Champa Street, Suite 600, Denver, CO 80202						8. FARM OR LEASE NAME Federal 17-22-8 ✓	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1060' FNL & 950' FWL, Sec. 17-22N-R8W ✓ At top prod. interval reported below At total depth						9. WELL NO. No. 1 ✓	
14. PERMIT NO. _____ DATE ISSUED _____						10. FIELD AND POOL, OR WILDCAT Wildcat	
15. DATE SPUDDED 8-1-78 16. DATE T.D. REACHED 8-25-78 17. DATE COMPL. (Ready to prod.) _____ 18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 6724' GR 19. ELEV. CASINGHEAD _____						11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 17-T22N-R8W ✓	
20. TOTAL DEPTH, MD & TVD 1475		21. PLUG, BACK T.D., MD & TVD _____		22. IF MULTIPLE COMPL., HOW MANY* _____		12. COUNTY OR PARISH San Juan	
				23. INTERVALS DRILLED BY →		13. STATE NM	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* _____						25. WAS DIRECTIONAL SURVEY MADE	
26. TYPE ELECTRIC AND OTHER LOGS RUN _____						27. WAS WELL CORED	
29. CASING RECORD (Report all strings set in well)							
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD		AMOUNT PULLED	
7"		100'		Cmt x 50 sx Class B Neat		None	
4 1/2"		1459'		155 sx 50-50 POZ 6% gel, x 50 sx class B Neat		None	
29. LINER RECORD							
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	30. TUBING RECORD		
					SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8"	1414'	
31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
1190-1240	1392-1398	1 SPF		DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED		
1299-1308	1405-1412			1190-1521	Foam frac x 65,000# 10-20 sn, 32,000 gal 70 Quality foam		
1329-1336	1500-1521						
1367-1381							
33. PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or Abandoned)	
10/17/78						WELL STATUS (Producing or Abandoned)	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	
10/17/78			→				
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.		
		→		TSTM	4 BWPD		
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)							
35. LIST OF ATTACHMENTS							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records.							
SIGNED		Paul C. Ellison		TITLE		Vice President	

*(See Instructions and Spaces for Additional Data on Reverse Side)

NMOCC



APR 23 1980

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. **Items 22 and 24:** If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool. **Item 33:** Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES			38. GEOLOGIC MARKERS			
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUM VERT. DEPTH
Pictured Cliffs	820	1066	Sandstone, Shale			
Laventana	1176	1320	Sandstone			

