Form 9-330
(Rev. 5-63)

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 *

5. LEASE DESIGNATION AND SERIAL NO.: SF 080437-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

7. UNIT AGREEMENT NAME: Canada Ojitos Unit

8. FARM OR LEASE NAME:

9. WELL NO.: 20 (H-9)

10. FIELD AND POOL, OR WILDCAT: Pictured Cliffs Wildcat

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA: Sec. 9, T-25N, R-1W

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☒ Other

b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other

2. NAME OF OPERATOR: BENSON-MONTIN-GREER DRILLING CORP.

3. ADDRESS OF OPERATOR: 221 Petroleum Center Building, Farmington, NM 87401

4. LOCATION OF WELL (*Report location clearly and in accordance with any State requirements*)*
At surface: 1450' FNL, 1190' FEL, Sec. 9, T-25N, R-1W
At top prod. interval reported below: --
At total depth: Same

14. PERMIT NO. | DATE ISSUED

12. COUNTY OR PARISH: Rio Arriba | 13. STATE: New Mexico

15. DATE SPUDDED	16. DATE T.D. REACHED	17. DATE COMPL. (*Ready to prod.*)	18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*	19. ELEV. CASINGHEAD
7-27-72	8-6-72	8-7-72	7357' GR	7569'

20. TOTAL DEPTH, MD & TVD	21. PLUG, BACK T.D., MD & TVD	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY	ROTARY TOOLS	CABLE TOOLS
2309'	--	--	→	0-2309	None

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*: None

25. WAS DIRECTIONAL SURVEY MADE: No

26. TYPE ELECTRIC AND OTHER LOGS RUN: None

27. WAS WELL CORED: No

28. CASING RECORD (*Report all strings set in well*)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8"	24#	171'	12¼"	100 sacks	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)
	None			

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
	None	

31. PERFORATION RECORD (*Interval, size and number*): None

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
	None

33.* PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (*Flowing, gas lift, pumping—size and type of pump*)	WELL STATUS (*Producing or shut-in*)
---	--	P & A

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD →	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO

FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE →	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)

RECEIVED NOV 9 1972 OIL CON. COM. DIST. 3

34. DISPOSITION OF GAS (*Sold, used for fuel, vented, etc.*)

TEST WITNESSED BY

35. LIST OF ATTACHMENTS: Unable to regain circulation lost from under surface casing. Well P & A.

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED [signature] TITLE Vice-President DATE 8-10-72

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