

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

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

Form approved.  
Budget Bureau No. 42-R1424.

**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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-16997
2. NAME OF OPERATOR Benson-Montin-Greer Drilling Corp.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 221 Petroleum Center Building, Farmington, N.M.		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space-17 below.) At surface 2260' FNL, 2285 FEL, Sec. 3, T-26N, R-1E		8. FARM OR LEASE NAME Smith
14. PERMIT NO.		9. WELL NO. 1 (G-3)
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6981' GR		10. FIELD AND POOL, OR WILDCAT Wildcat
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 3, T-26N, R-1E
		12. COUNTY OR PARISH   13. STATE Rio Arriba   New Mexico

**RECEIVED**  
DEC 08 1982  
U.S. GEOLOGICAL SURVEY  
FARMINGTON, N.M.

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input checked="" type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <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.)\*

Following is modification of proposed casing and cementing program (Item #23) approved on October 14, 1982 for subject well.

**PROPOSED CASING AND CEMENTING PROGRAM**

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
12-2/4"	8-5/8"	24#	150'	150 sacks
7-7/8"	5-1/2"	14#	1975'	*100 sacks
4-3/4"	3-1/2"	9.30#	2150'	50 sacks

NOTE

The above changes approved verbally by Minerals Management Service Drilling Engineering Department.

\*Volume of cement used on 5-1/2" casing will be sufficient to bring cement top a minimum of 100' above top of Graneros formation as required by Minerals Management Service Drilling Engineering Department.

18. I hereby certify that the foregoing is true and correct.  
SIGNED [Signature] TITLE Vice-President DATE Dec. 7, 1982

(This space for Federal or State office use)

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

**APPROVED  
AS AMENDED**

DEC 10 1982  
[Signature]  
JAMES F. SIMS  
DISTRICT ENGINEER

\*See Instructions on Reverse Side

**NMOCC**