

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

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

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. SF 081222-B
2. Name of Operator Benson-Montin-Greer Drilling Corp.	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. 501 Airport Drive, Suite 221, Farmington, NM 87401 (505) 325-8874	7. If Unit or CA, Agreement Designation Canada Ojitos Unit
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) NW/NE 227' FNL, 2800' FWL, Sec. 22, T26N, R1W	8. Well Name and No. B-22 #44
	9. API Well No. 30-039-25602-50440
	10. Field and Pool, or Exploratory Area West Puerto Chiquito Mancos
	11. County or Parish, State Rio Arriba, New Mexico

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input type="checkbox"/> Other
	<input type="checkbox"/> Change of Plans
	<input checked="" type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

13. 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.)*

10/21/96 Spudded at 2:15 P.M.

RECEIVED
DEC - 6 1996
OIL CON. DIV.
DIST. 3

14. I hereby certify that the foregoing is true and correct		NOV 21 1996
Signed <u>[Signature]</u>	Title <u>President</u>	Date
(This space for Federal or State office use)		
Approved by <u>[Signature]</u>	Title <u>Chief, Lands and Mineral Resources</u>	Date <u>DEC 5 1996</u>
Conditions of approval, if any:		Date