

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42 R1424

5. LEASE DESIGNATION AND SERIAL NO.

CONTRACT 237

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

JICARILLA TRIBAL

7. UNIT AGREEMENT NAME East

Puerto Chiquito Mancos

8. FARM OR LEASE NAME

9. WELL NO.

41 (F-20)

10. FIELD AND POOL, OR WILDCAT

Puerto Chiquito Mancos

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

Sec. 20, T-27N, R-1E

12. COUNTY OR PARISH

Rio Arriba

13. STATE

New Mexico

1. OIL WELL ☒ GAS WELL ☐ 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.*
See also space 17 below.)

At surface

1900' FNL, 2008' FWL, Sec. 20, T-27N, R-1E

14. PERMIT NO.

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

6998' GR

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

PULL OR ALTER CASING ☐

FRACTURE TREAT ☐

MULTIPLE COMPLETE ☐

SHOOT OR ACIDIZE ☐

ABANDON* ☐

REPAIR WELL ☐

CHANGE PLANS ☐

(Other) ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☒

REPAIRING WELL ☐

FRACTURE TREATMENT ☐

ALTERING CASING ☐

SHOOTING OR ACIDIZING ☐

ABANDONMENT* ☐

(Other) ☐

(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.)*

5- 4-81 TD 2722'. Ran 89 joints (2725.52' TO, 2750.44' overall)
7" OD 23# J-55 8 round Range 2 casing, cemented with 190
sacks 65/35 pozmix, 12% gel, 12 $\frac{1}{4}$ # gilsonite per sack,
followed with 100 sacks Class B cement with $\frac{1}{4}$ # gelflake
per sack.

5- 6-81 Pressured up on casing to 1000#. No pressure decrease in
one hour.

JUL 22 1981

FARMINGTON, N.M.

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

SIGNED

TITLE Vice-President

DATE

7-16-81

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side