

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved,
Budget Bureau No. 42 R1421

5. LEASE DESIGNATION AND SERIAL NO.

14-20-604-83

6. IS INDIAN, ALIQUOTED OR TRIBE LAND

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 ☒ GAS WELL ☐ OTHER

2. NAME OF OPERATOR

Benson-Montin-Greer Drilling Corp.

3. ADDRESS OF OPERATOR

221 Petroleum Center Bldg. Farmington NM

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)
At surface

660' from North line, 1690' from West line Sec.22

14. PERMIT NO.

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

5669 GR

Ute Mountain

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Ute Mountain

9. WELL NO.

#14

10. FIELD AND POOL, OR WILDCAT

Verde Gallup

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

22-31N-R14W

12. COUNTY OR PARISH 13. STATE

San Juan

NM

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

PULL OR ALTER CASING

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Change Operator

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<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.)*

Change operator from Engineering & Production Service, Inc. to
Benson-Montin-Greer Drilling Corp. Effective May 1, 1974



JUN 27 1974

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

SIGNED

TITLE Vice-President

DATE 6-26-74

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: