

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Budget Bureau No. 1004-0135
Expires August 31, 1985

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. NAME OF OPERATOR Benson-Montin-Greer Drilling Corp.	7. UNIT AGREEMENT NAME La Plata Mancos Unit
2. ADDRESS OF OPERATOR 221 Petroleum Center Building, Farmington, NM 87401	8. FARM OR LEASE NAME
3. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 850' FNL, 1020' FWL, Sec. 6, T31N R13W, NMPM	9. WELL NO. 6 (C-6)
14. PERMIT NO.	10. FIELD AND POOL, OR WILDCAT La Plata Gallup
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6027' GR	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 6, T31N R13W
	12. COUNTY OR PARISH San Juan
	13. STATE New Mexico

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 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 VALVE <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Note: Resume gas injection <input checked="" 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.)

Well will be restored to gas injection status as follows:

- (1) Gas transmission line will be tested for leaks.
- (2) Well will be tested for suitable injection pressure and rate.
- (3) In the event either of these tests fail the problem will be corrected and injection commenced.

This Sundry Notice requested by Mr. Stephen Mason, Petroleum Engineer as a follow up to BMG letter of August 24, 1988 which responded to Bureau of Land Management letter of July 25, 1988.

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

SIGNED Virgil L. Stoabs

TITLE Vice President

DATE Sept. 9, 1988

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE

NM 000

*See Instructions on Reverse Side