

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Form approved.
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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | JAN 20 1987 | | 5. LEASE DESIGNATION AND SERIAL NO. NM 33009 | |
| 2. NAME OF OPERATOR Benson-Montin-Greer Drilling Corp. | | BUREAU OF LAND MANAGEMENT FARMINGTON RESOURCE AREA | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME | |
| 3. ADDRESS OF OPERATOR 221 Petroleum Center Building, Farmington, New Mexico 87401 | | | | 7. UNIT AGREEMENT NAME Canada Ojitos Unit | |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1200' FNL 300' FWL, Section 17, T25N, R1W | | | | 8. FARM OR LEASE NAME Canada Ojitos Unit | |
| 14. PERMIT NO. | | 15. ELEVATIONS (Show whether OF, RT, GR, etc.) 7465' GR | | 9. WELL NO. 35 (BEIP) | |
| | | | | 10. FIELD AND POOL, OR WILDCAT West Puerto Chiquito Mancos | |
| | | | | 11. SEC., T., R., M., OR R.L. AND SURVEY OR AREA Sec. 17, T25N, R1W | |
| | | | | 12. COUNTY OR PARISH Rio Arriba | |
| | | | | 13. STATE New Mexico | |

16. 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 WELL <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | (Other) Set & Cement 5-1/2" | (Other) <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.)*

01/01/87

TD 7850'. Ran 203 joints 5-1/2" 20# and 23#, T&C and XL, N-80 set at 7802.94'.

Stage 1 Cemented out shoe with 65 sacks (80.60 cubic feet) 50/50 pozmix, followed with 155 sacks (248 cubic feet) RFC. Pressure tested to 2000 psig with zero percent drop in pressure in 30 minutes. Plug down at 10:00 AM.

Stage 2 Cemented through stage collar @ 6171.3' with 435 sacks (957 cubic feet) 65/35 pozmix. Pressure tested to 2500 psig with zero percent drop in pressure in 30 minutes. Plug down at 1:05 PM.

Stage 3 Cemented through stage collar @ 3780.48' with 625 sacks (1375 cubic feet) 65/35 pozmix. Full returns cement to surface. Plug down at 4:54 PM.

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

SIGNED [Signature] TITLE Vice President DATE 1/14/87

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

JAN 22 1987

JAN 21 1987

*See Instructions on Reverse Side

CIL CON. DIV.
DIST. 3

FARMINGTON RESOURCE AREA