

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SP 079288-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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.)

7. UNIT AGREEMENT NAME

Puerto Chiquito Unit

8. FARM OR LEASE NAME

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR

BENSON-MONTIN-GREER DRILLING CORP.

3. ADDRESS OF OPERATOR

221 Petroleum Center Building, Farmington, New Mexico

9. WELL NO.

21 (P-9)

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface

700' FSL, 1090' FEL, Sec. 9, T-26N, R-1E

10. FIELD AND POOL, OR WILDCAT

East Puerto Chiquito

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

Sec. 9, T-26N, R-1E

14. PERMIT NO.

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

7136' OR

12. COUNTY OR PARISH

13. STATE

Rio Arriba New Mexico

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

Progress Report

(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.)*

9-14-66 Spudded in 6-3/4" hole.

10- 6-66 TD 830'. Ran 5-1/2" OD 15.5# J-55 casing to 830'. Drilled out float collar, commenced drilling with air.

10-21-66 TD 2148'. Ran induction gamma ray log.

10-26-66 Drilled to TD 2188' with oil. Unable to establish circulation. Stuck drill pipe. Beaked off. Left 1 joint and 2 drill collars in hole.

11-12-66 Recovered fish.

Shut down waiting on orders.;

RECEIVED

JAN 25 1967

U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.



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

SIGNED

TITLE

Engineer

DATE

1-24-67

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

Instructions

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NEW MEXICO OIL CONSERVATION COMMISSION
1000 Rio Brazos Road
Aztec, New Mexico

June 28, 1967

U. S. G. S.
P. O. Box 959
Farmington, New Mexico

Gentlemen:

Notice of Intention to Drill was filed on Benson-Montin-Greer, Puerta Chiquita U. #21
located P-9-26N-1E / 11. ~~No further information has been~~
~~received.~~ Please indicate status of well.

_____ Location abandoned, well was never spudded.
_____ Drilling well.
_____ Work completed, completion forms to follow.

Remarks:

We have a report of spud date and an Electric log, but we need other completion papers or status report.

*T.D. 2323 PLO pumping F-S BLC PD
had not received last 20 of 6-30-67. ja*

Very truly yours,

Emmy Chew
District #3

cc: Benson-Montin-Greer
NMOCC, Santa Fe



THE HISTORY OF THE
CITY OF BOSTON
FROM 1630 TO 1800

1790

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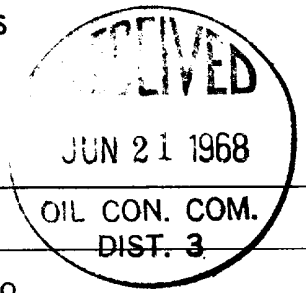
THE HISTORY OF THE
CITY OF BOSTON
FROM 1630 TO 1800

1790

| | |
|------------------------|--------------|
| NO. OF COPIES RECEIVED | 6 |
| DISTRIBUTION | |
| SANTA FE | 1 |
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| U.S.G.S. | |
| LAND OFFICE | |
| TRANSPORTER | OIL 1 GAS |
| OPERATOR | 3 |
| PRORATION OFFICE | |

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65



I. OPERATOR
Operator **BENSON-MONTIN-GREER DRILLING CORP.**
Address **221 Petroleum Center Building, Farmington, New Mexico**
Reason(s) for filing (Check proper box) Other (Please explain)
New Well Change in Transporter of:
Recompletion Oil Dry Gas
Change in Ownership Casinghead Gas Condensate

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|-----------------------------|---------------------|---|--------------------------------------|------------------|
| Lease Name | Well No. | Pool Name, Including Formation | Kind of Lease | Lease No. |
| Puerto Chiquito Unit | 21 | East Puerto Chiquito | State, Federal or Fee Federal | SF 079288 |
| Location (P-9) | | | | |
| Unit Letter P | 700 | Feet From The south Line and 1090 | Feet From The east | |
| Line of Section 9 | Township 26N | Range 1E | NMPM, Rio Arriba | County |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | | | | | |
|--|--|---------------|-----------------|----------------|--------------------------------------|------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) | | | | | |
| Benson-Montin-Greer Drilling Corp. | Farmington, New Mexico | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) | | | | | |
| None | | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit P | Sec. 9 | Twp. 26N | Rge. 1E | Is gas actually connected? No | When |

If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

| | | | | | | | | |
|--|--|------------------------------|---------------------------|----------|--------|-----------|-------------|--------------|
| Designate Type of Completion - (X) | Oil Well <input checked="" type="checkbox"/> | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| Date Spudded 9-14-66 | Date Compl. Ready to Prod. 6-9-68 | Total Depth 2323' | P.B.T.D. 2021' | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 7136' GR | Name of Producing Formation Mancos | Top Oil/Gas Pay 1682' | Tubing Depth 1689' | | | | | |
| Perforations 2272-82, 2222-42, 1910-38, 1712-30, 1682-92' | Depth Casing Shoe 2319' | | | | | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT | | | | | |
| 8-3/4" | 5-1/2" | 830 | 40 | | | | | |
| 5-1/4" | 3-1/2" | 2319 | 75 | | | | | |
| 2-3/8" | 2-3/8" | 1689 | - | | | | | |

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

| | | | |
|---|-----------------------------|---|---------------------|
| Date First New Oil Run To Tanks 6-9-68 | Date of Test 6-10-68 | Producing Method (Flow, pump, gas lift, etc.) Pump | |
| Length of Test 24 hours | Tubing Pressure | Casing Pressure | Choke Size |
| Actual Prod. During Test | Oil-Bbls. 12 | Water-Bbls. 0 | Gas-MCF 5.04 |

GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pitot, back pr.) | Tubing Pressure (shut-in) | Casing Pressure (shut-in) | Choke Size |

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

[Signature]
(Signature)
Vice-President
(Title)
June 20, 1968
(Date)

OIL CONSERVATION COMMISSION
JUN 21 1968
APPROVED _____
BY Original Signed by Emery C. Arnold
TITLE SUPERVISOR DIST. #3

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiply completed wells.

STATE OF NEW MEXICO }
COUNTY OF SAN JUAN } SS.

AFFIDAVIT

VIRGIL L. STOABS, of legal age, being first duly sworn on oath, deposes and states:

1. That he is Vice-President of Benson-Montin-Greer Drilling Corp., operator of the Puerto Chiquito Unit Well No. 21 (P-9) located in the southeast quarter of Section 9, Township 26 North, Range 1 East, Rio Arriba County, New Mexico.

2. That he supervised operations for the drilling of the subject well.

3. That during the drilling of the subject well the following deviation surveys were made:

| <u>Depth</u> | <u>Deviation</u> |
|--------------|------------------|
| 300' | 1/2° |
| 820' | 1-1/2 |
| 1050' | 3/4 |
| 1550' | 2 |
| 1830' | 2-1/4 |
| 2020' | 2 |
| 2323' | 2-1/2 |



Virgil L. Stoabs

Virgil L. Stoabs

Subscribed and sworn to before me, a Notary Public in and for said county and state, this 20th day of June, 1968.

Nancy Elaine Jones (York)

Notary Public

My Commission Expires:

8.20.1970

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.
SF 079288-E

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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.)

7. UNIT AGREEMENT NAME
PUERTO CHIQUITO UNIT

8. FARM OR LEASE NAME

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
BENSON-MONTIN-GREER DRILLING CORP.

9. WELL NO.
21 (P-9)

3. ADDRESS OF OPERATOR
221 Petroleum Center Building, Farmington, New Mexico

10. FIELD AND POOL, OR WILDCAT
East Puerto Chiquito

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

11. SEC., T., R., E., M., OR BEG. AND SURVEY OR AREA
Sec. 9, T-26N, R-1E

700' FSL, 1090' FEL, Sec. 9, T-26N, R-1E, N.M.P.M.

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
7136' GR

12. COUNTY OR PARISH 13. STATE
Rio Arriba 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 checked="" 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) <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 markets and zones pertinent to this work.)*

1-12-68 TD 2323'. Ran 73 joints 2313' 3-1/2" 7.70# J-55 nonupset tubing for long string, landed at 2319', cemented with 75 sacks regular cement. Good returns throughout cementing job.

1-15-68 Pressured up on casing to 1,000#. No pressure decrease in one hour.

RECEIVED

JUN 2 1968

U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.



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

SIGNED [Signature]

TITLE **Vice-President**

DATE **6-20-68**

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

Instructions

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**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
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5. LEASE DESIGNATION AND SERIAL NO.

SF 079288-X

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

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1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
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3. ADDRESS OF OPERATOR
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7. UNIT AGREEMENT NAME
PUERTO CHIQUITO UNIT

8. FARM OR LEASE NAME

9. WELL NO.
21 (P-9)

10. FIELD AND POOL, OR WILDCAT
East Puerto Chiquito

11. SEC., T., B., M., OR BLK. AND SURVEY OR AREA
Sec. 9, T-26N, R-1E

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)
7136' GR

12. COUNTY OR PARISH 13. STATE
Rio Arriba New Mexi

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|--|---|
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| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> |
| (Other) <input type="checkbox"/> | |

SUBSEQUENT REPORT OF:

| | |
|--|--|
| WATER SHUT-OFF <input checked="" type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| (Other) <input type="checkbox"/> | |

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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RECEIVED

JUN 2 1968

U. S. GEOLOGICAL SURVEY



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

SIGNED [Signature] TITLE Vice-President DATE 6-20-68

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
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1-18-68 TD 2323'. Cleaned out to 2306'. Spotted 175 gallons 15% acid. Perforated 2272-2282' with 7 shots, 2222-2242' with 7 shots.
1-19-68 Sand-oil fractured with 30,000# 20/40 sand, 15,000# 10/20 sand, mixed with 900 barrels lease crude, flushed with 30 barrels crude. No apparent breakdown pressure. Max. TP 3700#, min. 3400#, avg. 3500#, Inst. SDP 600#, 6-min. SIP zero. Average overall injection rate 24 BPM. Set bridge plug at 2021'. Perforated with 20 shots from 1910' to 1938'. Pumped in 170 gallons 15% mud acid, displaced into formation.

Sand-oil fractured with 30,000# 20/40 sand, 30,000# 10/20 sand, 1,442 barrels lease crude, flushed with 30 barrels crude. Breakdown pressure 3000# to 1300#. Max. TP 3500#, min. 2700#, AVG. 3400#. Inst. SDP zero. Average overall injection rate 27 BPM. Set bridge plug at 1800'. Perforated with 8 holes from 1712-1730' and with 8 holes from 1682-92'. Pumped in 155 gallons 15% mud acid, displaced into formation.

(Continued)

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

SIGNED _____

TITLE _____

DATE _____

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

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JUN 21 1968

U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

*See Instructions on Reverse Side



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U.S. GOVERNMENT PRINTING OFFICE: 1967-O-685228

9 67 - 551



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Puerto Chiquito

8. FARM OR LEASE NAME

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21 (P-9)

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Sec. 9, T-26N, R-1E

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Rio Arriba New Mexico

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

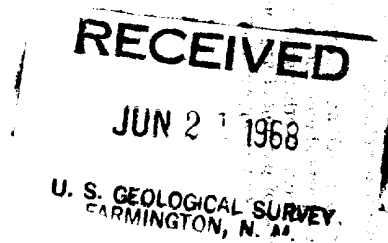
(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

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Stage 3 frac: Treated with 30,000# 20/40 sand, 15,000# 10/20 sand, 951 barrels lease crude, flushed with 30 barrels crude. Breakdown pressure 4000# to 3000#. Max. TP 3700#, min. 3400#, AVG. 3500#, inst. SDP 200#, 5-min. SIP vacuum. Average overall injection rate 21 BPM.

1-23-68 Started pumping load oil.



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

SIGNED

[Signature]

TITLE

Vice-President

DATE

6-20-68

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side

Instructions

General: This form is designed for submitting proposals to perform certain well operations, and reports of such operations, when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 17: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of putting of any casing, liner or tubing putted and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

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BUREAU OF LAND MANAGEMENT

