

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(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

8. FARM OR LEASE NAME

Mancos

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

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 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 ☐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.)*

12-28-81 Acidized with 1000 gallons 15% HCL plus 4 gallons corrosion inhibitor plus 3 gallons silicate control agent, plus 2 gallons anti-sludging agent, plus 2 gallons Ezeflow additive. Average treating pressure 1600#, avg. injection rate 2 BPM, inst. SIP 600#. Dropped total of 80 ball sealers during treatment.

Rigged up to swab.

12-31-81 Released packer, ran in hole and reset packer at 3598', halfway between perforated intervals (3516-3576' and 3615'-3645') to test lower zone. Rigged up to swab. Recovered a few gallons of water, no show of oil, light show of gas.

1- 5-82 TP zero: Ran swab, failed to recover any fluid. Heavy fumes of gas, TSTM.

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

SIGNED

TITLE Vice-President

DATE 1-20-82

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side

NMOCC

BY