

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

THE OIL CONS COMMISSION
Drawer DD
Artesia, NM 88210

Budget Bureau No. 1004-1035
Expires: March 31, 1993

5. Lease Designation and Serial No. NM 033705
NM-8910124100 12

6. If Indian, Allottee of Tribe Name

7. If Unit or CA, Agreement Designation

North Benson Queen Unit

8. Well Name and No.

North Benson Queen #14

9. API Well No.

30-015-10131

10. Field and Pool, or Exploratory Area

Benson Queen Grayburg

11. County or Parish, State

Eddy, New Mexico

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir
Use "APPLICATION FOR PERMIT-" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Merit Energy Company

3. Address and Telephone No.

P.O. Drawer NN - Jal, NM 88252 (505)395-2173

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1980' FSL - 660' FWL, SEC 28 L, T18S, R30E

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION		
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans	
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction	
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing	
	<input checked="" type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off	
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection	
	<input type="checkbox"/> Other	<input type="checkbox"/> Dispose Water	

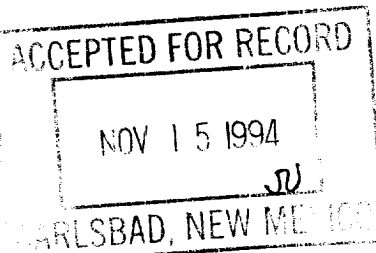
(Note: Report of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

AS PER THE SUNDRY FILED PREVIOUSLY THE WORK ON REPAIRING THE CASING ON THIS WELL WILL COMMENCE NO LATER THAN JUNE 1, 1995.

NOV 8 11 54 AM '94

RECEIVED



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

Signed

[Signature]

Title West District, Operations Supt

Date 12-Oct-94

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.