DERDON MONTH OF	KEEK DRILL		505 321 920	P.001/001
Submit 3 Copies State of New Mexico				ř.
District Office Energy, Minerals and Natural Resources Department		t	/ Po	rm C-103
DIAMPY OF 1			R	:vised 1-1-89
P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION		WELL API NO.		
2040 Pacheco St.		30-039-27811		
OISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, NM 87505		5. Indicate Type	of Lease	
			STATE	FEE 🗵
DISTRICT LII 1000 Rio Brizos Rd., Aztec, NM 87410		6. State Oil & G	ias Lease No.	
CUMPRY NOTICES AND DEPORTS ON WELLS				מ <i>ת החורו החורו החורו החורו ה</i>
SUNDRY NOTICES AND REPORTS ON WELLS				
(DO NOT USE THIS FORM FOR PORPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"		7. Lease Name of	or Unit Agreement N	lame
(FORM C-101) FOR SUCH PROPOSALS)				
1. Type of Well:		Casaus		4
OIL GAS WELL S OTHER		1		
2. Name of Operator		8. Well No.		
Benson-Montin-Greer Drilling Corporation		#1		
3. Address of Operator		9. Pool name or	Wildcat	
4900 College Blvd, Farmington, NM 87401	_	Basin Fruitland	• •	(Sangar
4. Well Location				
Unit Letter O: 885' Feet From The SOUTH	Line and	1945'	_ Feet From The	EAST Line
Section 20 Township 25N Range 2W		NMPM	-	Rio Arriba County
10. Elevation (Show wheth			VIIIIIIIIII	
7152				
Check Appropriate Box to Indica	te Nature of No	tice, Report,	or Other Data	
II. NOTICE OF INTENTION TO:	1 .	SUBSEQUEN	NT REPORT	OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK	· _	_ ALTERING CAN	BING
TEMPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT		ANTONIAENT [
L OR ALTER CASING L CASING TEST AN		D CEMENT JOB		
OTHER: Producing one zone x	OTHER:			
	I			
 Describe Proposed or Completed Operations (Clearly state all pertinent densits, and give pertinent date, including estimated date of starting any proposed work) SEE RULE 1103. 				
Benson-Montin-Greer Drilling is producing the Gavilan PC only at this time. We plan on completing the Fruitland Coal zone sometime in the				
future.				
Please cancel thi	1	٨		
Final conce the	1 Inton	∜		
		~ 1		
I hereby certify that the information above is true and complete to the pest of my	1			
SIGNATURE	•	ndusta di 2		
	TIME Pr	oduction Clerk	DATE	03/22/06
TYPE OR PRINT NAME Trudy Grubelnik			TELEPHONE NO.	505-325-8874
(This apace for State Use)				
APPROVED BY /- Villancea TITLE OR & GAS INSPECTION, DATE. OFFE				
APPROVED BY / V WWW.	YITLE	- AND MET OF 10	E CARE	
CONDITIONS OF APPROVAL IS ANY.				