

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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		3. LEASE DESIGNATION AND SERIAL NO. NM 33012
2. NAME OF OPERATOR Benson-Montin-Greer Drilling Corp.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 221 Petroleum Center Building, Farmington, NM 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 393' FNL, 2367' FEL, Sec. 29, T25N, R1W		8. FARM OR LEASE NAME Canada Ojitos Unit
14. PERMIT NO.		9. WELL NO. 28 (B-29)
15. ELEVATIONS (Show whether of, ft., gr., etc.) 7496' GR		10. FIELD AND POOL, OR WILDCAT West Puerto Chiquito Mancos
		11. SEC., T., R., M., OR B.L. AND SURVEY OR AREA Sec. 29, 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) <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 markers and zones pertinent to this work.)

11/26/85

TD 7500'. Ran 191 joints 5-1/2" 23# N-80 LT & C Range 3 New APD casing (7510.60' including guide shoe-float collar and two 2 stage cementing collars) set at 7490'.

Stage 1

Cemented out shoe with 228 cubic feet (175 sacks) 50/50 pozmix, 2% gel, 1/4# celloflake and 6-1/4# coalite per sack. Slurry weight 13 pounds per gallon. Followed with 118 cubic feet (100 sacks) Class B cement with 1/4# celoflake per sack. Slurry weight 15.6 pounds per gallon. Displaced plug with 36 barrels of water and 133 barrels of mud. Reciprocated with casing 15' throughout cementing and displacing operation. Had full mud returns throughout operation. Plug down at 8:30 AM, 11/26/85. Pressure tested to 2000 psig with 0 percent drop in pressure in 30 minutes.

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

SIGNED Luigi N. Crooks TITLE Vice President DATE 12/09/85

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: _____

*See Instructions on Reverse Side

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.