

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME Canada Ojitos Unit	
2. NAME OF OPERATOR Benson-Montin-Greer Drilling Corp.		8. FARM OR LEASE NAME Canada Ojitos Unit	
3. ADDRESS OF OPERATOR 221 Petroleum Center Building, Farmington, NM 87401		9. WELL NO. 30 (F-30)	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1755' FNL, 2418' FWL Section 30, T25N, R1W		10. FIELD AND POOL, OR WILDCAT Puerto Chiquito West Mancos	
14. PERMIT NO.		11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA Sec. 30, T25N, R1W	
15. ELEVATIONS (Show whether OF, RT, OR, etc.) 7671' GR		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"/>
FRACURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACURE 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.)*

12/04/85 Spudded well with 13-3/4" hole at 8:15 P.M.

12/05/85 TD 535' in 13-3/4" hole. Ran 13 joints 9-5/8" K-55 32#, 527' set at 535'. Cemented with 390 sacks (460 cubic feet) Class B cement with 2% calcium chloride. Circulated 3 barrels cement to surface. Plug down at 7:00 AM. Pressure tested to 500 psig with 0 percent drop in pressure in 30 minutes.

RECEIVED
DEC 11 1985
OIL CON. DIV.
DIST. 3

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

SIGNATURE <i>[Signature]</i>	TITLE Vice President	DATE 12/09/85
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(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL IF ANY: _____

*See Instructions on Reverse Side