

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT

RECEIVED

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other ☐		5. LEASE DESIGNATION AND SERIAL NO. NM 13947																									
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other ☐		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Canada Ojitos Unit																									
2. NAME OF OPERATOR Benson-Montin-Greer Drilling Corp.		7. UNIT AGREEMENT NAME Canada Ojitos Unit																									
3. ADDRESS OF OPERATOR 221 Petroleum Center Building, Farmington, NM 87401		8. FARM OR LEASE NAME																									
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1800' FNL, 1675' FEL, R 30, E 26N, E 10 At top prod. interval reported below At total depth Same Same		9. WELL NO. 21 (a-32)																									
10. FIELD AND POOL, OR WILDCAT Chiquito Mancos West		11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 32, T26N, R1W																									
12. COUNTY OR PARISH Rio Arriba		13. STATE New Mexico																									
14. SURFACE OF LAND MANAGEMENT FARMINGTON RESOURCE AREA		15. DATE SPUDDED 11-9-81																									
16. DATE T.D. REACHED 6-4-82		17. DATE COMPL. (Ready to prod.) 9/27/84																									
18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 7560' GR		19. ELEV. CASINGHEAD 7560'																									
20. TOTAL DEPTH, MD & TVD 8040'		21. PLUG, BACK T.D., MD & TVD 7410'																									
22. IF MULTIPLE COMPL., HOW MANY* -		23. INTERVALS DRILLED BY 0-8040'																									
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Niobrara A, B & C from 7147' to 7390'		25. WAS DIRECTIONAL SURVEY MADE yes																									
26. TYPE ELECTRIC AND OTHER LOGS RUN Induction Gamma Ray, Compensated Neutron, Cement Bond		27. WAS WELL CORRED no																									
28. CASING RECORD (Report all strings set in well)																											
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34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented																											
35. LIST OF ATTACHMENTS One Re: Acid and Sand Fracing																											
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records																											
SIGNED <u>Miguel L. Shuck</u> TITLE <u>Vice President</u>																											

* (See Instructions and Spaces for Additional Data on Reverse Side)

OCT 16 1984

NMOCC

FARMINGTON RESOURCE AREA
RV Smm

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other _____				5. LEASE DESIGNATION AND SERIAL NO. NM 13947	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____				6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Benson-Montin-Greer Drilling Corp.				7. UNIT AGREEMENT NAME Canada Ojitos Unit	
3. ADDRESS OF OPERATOR 221 Petroleum Center Building, Farmington, NM 87401				8. FARM OR LEASE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1800' FNL, 1675' FEL, Sec. 32, T26N, R1W At top prod. interval reported below At total depth				9. WELL NO. 21 (G-32)	
14. PERMIT NO. _____ DATE ISSUED _____				10. FIELD AND POOL, OR WILDCAT Chiquito Mancos West Puerto	
15. DATE SPUDDED _____ 16. DATE T.D. REACHED _____ 17. DATE COMPL. (Ready to prod.) _____				11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 32, T26N, R1W	
18. ELEVATIONS (DF, REB, RT, GR, ETC.)* _____				12. COUNTY OR PARISH _____ 13. STATE _____	
20. TOTAL DEPTH, MD & TVD _____		21. PLUG, BACK T.D., MD & TVD _____		19. ELEV. CASINGHEAD _____	
22. IF MULTIPLE COMPL., HOW MANY* _____		23. INTERVALS DRILLED BY _____		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* _____	
25. WAS DIRECTIONAL SURVEY MADE _____		26. TYPE ELECTRIC AND OTHER LOGS RUN _____		27. WAS WELL CORED _____	
RECEIVED OCT 26 1984					
28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	AMOUNTING RECORD	AMOUNT PULLED
				OIL CON. DIV.	
				DIST. 3	
29. LINER RECORD					
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	
30. TUBING RECORD					
SIZE	DEPTH SET (MD)	PACKER SET (MD)			
31. PERFORATION RECORD (Interval, size and number)					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
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33.* PRODUCTION					
DATE FIRST PRODUCTION _____		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) _____			WELL STATUS (Producing or shut-in) _____
DATE OF TEST _____	HOURS TESTED _____	CHOKE SIZE _____	PROD'N. FOR TEST PERIOD _____	OIL—BSL. _____	GAS—MCF. _____
FLOW. TUBING PRESS. _____	CASING PRESSURE _____	CALCULATED 24-HOUR RATE _____	OIL—BSL. _____	GAS—MCF. _____	WATER—BSL. _____
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) _____			TEST WITNESSED BY _____		
35. LIST OF ATTACHMENTS					
AMENDED COMPLETION REPORT: Additional information - log tops.					
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records					
SIGNED <u>Miguel A. Lopez</u>		TITLE Vice President		DATE 10/25/84	

*(See Instructions and Spaces for Additional Data on Reverse Side)

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
				Undifferentiated		
				Nacimientos	surface to 3470'	
				Ojo Alamo	3470'	
				Fruitland	3590'	
				Pictured Cliffs	3690'	
				Lewis	3785'	
				Mesa Verde	5485'	
				Point Lookout	5915'	
				Mancos	6160'	
				Niobrara A	7120'	
				Niobrara B	7188'	
				Niobrara C	7318'	

BENSON-MONTIN-GREER DRILLING CORP.

ATTACHMENT TO FORM 9-330
WELL COMPLETION OR RECOMPLETION REPORT AND LOG

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

Amount and Kind of Material Used

Niobrara C - Acidized with 2000 gallons 15% HCL, 6 gallons
FTA & 6 gallons A-250

Sand fraced with Premixed: 525 gallons J292
(YFGO gelling agent) mixed 9#/1000 gallons of
diesel, 50# gallons of J295 (YFGO activator),
1 gallon/1000 of diesel. Mixed on the fly:
375# of J242 (YFGO breaker), 10-15#/1000
gallons of YFGO.

Niobrara B & A - Treated perforations with NARS breakdown
solution.

Sand fraced with Premixed: 235 gallons J292
(YFGO gelling agent) mixed 9#/1000 gallons of
diesel, 25 gallons of J295 (YFGO activator) 1
gallon/1000 gallons of diesel. Mixed on the
fly: 675# of J242 (YFGO breaker) 10-15#/1000
gallons of YFGO.

Attachment pertaining to Canada Ojitos Unit #21 (G-32)
Sec. 32, T26N, R1W
Rio Arriba County, New Mexico