

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SF 079288-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Benson-Montin-Greer Drilling Corp.

3. ADDRESS OF OPERATOR

221 Petroleum Center Building, Farmington, NM 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

786' FNL, 2038'FWL, Sec. 8, T26N, R1E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

7252' GR

7. UNIT AGREEMENT NAME

East
Puerto Chiquito Mancos

8. FARM OR LEASE NAME

9. WELL NO.

#37 (C-8)

10. FIELD AND POOL, OR WILDCAT

East
Puerto Chiquito Mancos

11. SEC., T., R., M., OR B.L.E. AND
SURVEY OR AREA

Sec. 8, T26N, R1E

12. COUNTY OR PARISH

13. STATE

Rio Arriba New Mexico

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

<input type="checkbox"/>
<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input type="checkbox"/>

PULL OR ALTER CASING

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

REPAIRING WELL

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

(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.)*

Operator proposes to perforate, acidize and test potential pay zones within the overall Niobrara Greenhorn intervals when road conditions improve to allow movement of rig and trucks to do the work.

THIS SUNDRY NOTICE IN RESPONSE TO BUREAU OF LAND MANAGEMENT
LETTER DATED SEPTEMBER 6, 1984.

NOV 26 1984

OIL CON. DIV.
DIST. 3

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

SIGNED

TITLE Vice President

DATE 10/25/84

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD

NOV 08 1984

*See Instructions on Reverse Side

NMOCC

FARMINGTON RESOURCE AREA

BY sm