	DEDAG	UNITED		SUBMIT IN TRIPL	ICATE*	Form approved. Budget Bureau No. 42-R1424
	DEPAR	RTMENT OF		OR verse side)	5. LE	ASE DESIGNATION AND SERIAL NO.
SUNDRY NOTICES AND REPORTS ON WELLS						NM-19803
(Do not use th	ais form for pro	OTICES AND OPPOSE TO PERSON TO PERSON TO PERSON TO PERSON FOR PERSON FOR PERSON	to deepen or nive	hack to a different recovery		INDIAN, ALLOTTEE OR TRIBE NAME
OIL GAS	other	·				T AGREEMENT NAME
2. NAME OF OPERATOR BENSON-MONTIN-GREER DRILLING CORP.						cto Chiquito Manco
ADDRESS OF OPERAT		V-GREER DR	TITING COL	<u> </u>		LL NO.
221 P	etroleum	n Center B	uilding, H	Farmington, NM		38 (H-8)
LOCATION OF WELL See also space 17 b At surface	(Report location lelow.)	on clearly and in ac	cordance with any	State requirements.	Pter	to Chiquito Manco
1980'	FNL, 66	50 FEL, Se	c. 8, T261	i, kíe	<u> </u>	East C., T., R., M., OR BLK. AND SURVEY OR AREA
. PERMIT NO.	·	15. ELEVATION	s (Show whether Da		N Se	c. 8, T26N, RIE
			7051	.' GR	DAME OF THE PERSON OF THE PERS	Arriba New Mexi
•			x To Indicate N	lature of Notice, Repo	rt, or Other D	Pata
	NOTICE OF IN				SUBSEQUENT REA	PORT OF:
TEST WATER SHUT		PULL OR ALTER		WATER SHUT-OFF		REPAIRING WELL
SHOOT OR ACIDIZE		MULTIPLE COMPI		FRACTURE TREATMEN		ALTERING CASING
REPAIR WELL			 	SECOTING OF SCIDIZA	176	ABANDONMENT*
MEESTE MEDIT	1 1	CHANGE PLANS	1 1	(Other)	Spud	X
(Other) 7. DESCRIBE PROPOSED proposed work.		OPPRATIONS (Clean)	y state all pertinen	Completion or	results of mult Recompletion Re	iple completion on Well port and Log form.) ag estimated date of starting any for all markers and zones perti-
(Other)	.)•	OPERATIONS (Clear)	y state all pertinen ve subsurface local	(Norz: Report Completion or t details, and give pertinen ions and measured and true	results of mult Recompletion Re	iple completion on Well port and Log form.)
(Other) '. DESCRIBE PROPOSED proposed work.	.)•	OPERATIONS (Clear)		(Norz: Report Completion or t details, and give pertinen ions and measured and true	results of mult Recompletion Re it dates, includir e verticul depths	iple completion on Well port and Log form.) g estimated date of starting any s for all markers and zones perti-
(Other) DESCRIBE PROPOSED proposed work.	.)•	OPERATIONS (Clear)		(Norz: Report Completion or t details, and give pertinen ions and measured and true	results of mult Recompletion Re it dates, includir e verticul depths	port and Log form.) ag estimated date of starting any for all markers and zones perti-
(Other) '. DESCRIBE PROPOSED proposed work.	.)•	OPERATIONS (Clear)		(Norz: Report Completion or t details, and give pertinen ions and measured and true	results of mult Recompletion Re t dates, includir e vertical depths	EGEIVED
(Other) '. DESCRIBE PROPOSED proposed work.	.)•	OPERATIONS (Clear)		(Norz: Report Completion or t details, and give pertinen ions and measured and true	results of mult Recompletion Re t dates, includir e vertical depths	port and Log form.) g estimated date of starting any for all markers and zones perti-
(Other) DESCRIBE PROPOSED proposed work.	.)•	OPERATIONS (Clear)		(Norz: Report Completion or t details, and give pertinen ions and measured and true	results of mult Recompletion Re t dates, includir e vertical depths	EGEIVED MAY 181983 L CON. DIV.
(Other) '. DESCRIBE PROPOSED proposed work.	.)•	OPERATIONS (Clear)		(Norz: Report Completion or t details, and give pertinen ions and measured and true	results of mult Recompletion Re t dates, includir e vertical depths	EGEIVED MAY 181983 L CON. DIV.
(Other) C. DESCRIBE PROPOSED proposed work.	.)•	OPERATIONS (Clear)		(Norz: Report Completion or t details, and give pertinen ions and measured and true	results of mult Recompletion Re t dates, includir e vertical depths	EGEIVED MAY 181983 L CON. DIV.
(Other) DESCRIBE PROPOSED proposed work.	.)•	OPERATIONS (Clear)		(Norz: Report Completion or t details, and give pertinen ions and measured and true	results of mult Recompletion Re t dates, includir e vertical depths	EGEIVED MAY 181983 L CON. DIV.

(This space for Federal or State office use) ACCEP HALFOR RECORD APPROVED BY CONDITIONS OF APPROVAL, IF ANY: TITLE .

MAY 17 1983

*See Instructions on Reverse Side

MANCE

FARMINGTON DISTRICT