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NEW MEXICO OIL CONSERVATION COMMISSION

30-043-20386  
Form C-101  
Revised 1-1-65

5A. Indicate Type of Lease	
STATE <input checked="" type="checkbox"/>	FEE <input type="checkbox"/>
5. State Oil & Gas Lease No.	
St. NM-L-1561	

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name	
2. Name of Operator		9. Well No.	
Benson Mineral Group, Inc.		1	
3. Address of Operator		10. Field and Pool, or Wildcat	
3200 Anaconda Tower, 555 17th St., Denver, CO 80202		Wildcat <i>Chacra</i>	
4. Location of Well		12. County	
UNIT LETTER <u>M</u> LOCATED <u>810</u> FEET FROM THE <u>South</u> LINE		Sandoval	
AND <u>800</u> FEET FROM THE <u>West</u> LINE OF SEC. <u>36</u> TWP. <u>22N</u> RGE. <u>6W</u> NMPM			
19. Proposed Depth		19A. Formation	20. Rotary or C.T.
2000		Chacra	Rotary
21. Elevations (show whether DF, RT, etc.)	21A. Kind & Status Plug. Bond	21B. Drilling Contractor	22. Approx. Date Work will start
7010 GR	State-wide	B & N Drilling	As soon as permitted

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
9-5/8	7" used	23	100	50 sx. circ.	
6 1/2	4 1/2" new	9.5	2000	210 sx. circ.	

Benson Mineral Group, Inc. intends to drill the above well to evaluate the Chacra formation. A blowout preventer diagram is attached.  
The gas is not dedicated.

APPROVAL VALID  
FOR 90 DAYS UNLESS  
DRILLING COMMENCED,

EXPIRES 12-12-78

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM; IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

Signed Paul C. Ellison Title Production Manager Date 9-8-78  
(This space for State Use)

APPROVED BY Frank S. Chang TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

NEW MEXICO OIL CONSERVATION COMMISSION  
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form O-102  
Supersedes O-101  
Effective 1-1-66

All distances must be from the outer boundaries of the Section.

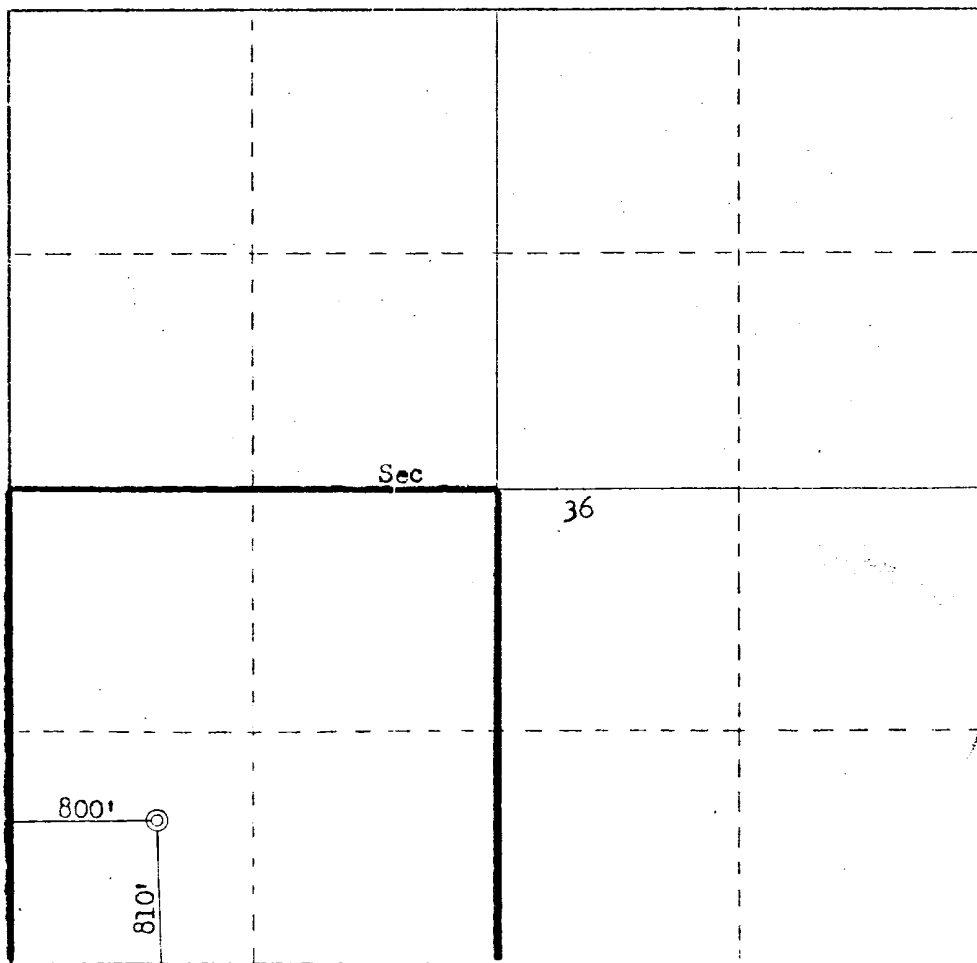
Owner <b>BENSON MINERAL GROUP, INC.</b>			Lease <b>STATE 36-22-6</b>		Well No. <b>1</b>
Section Letter <b>M</b>	Section <b>36</b>	Township <b>22N</b>	Range <b>6W</b>	County <b>SANDOVAL</b>	
Actual Plotting Location of Well: <b>810</b> feet from the <b>South</b> line and <b>800</b> feet from the <b>West</b> line					
Ground Level Elev. <b>7010</b>	Producing Formation <b>Chacra</b>	Well <b>Wildcat</b>		Dedicated Acreage <b>160</b>	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation \_\_\_\_\_

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) \_\_\_\_\_

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



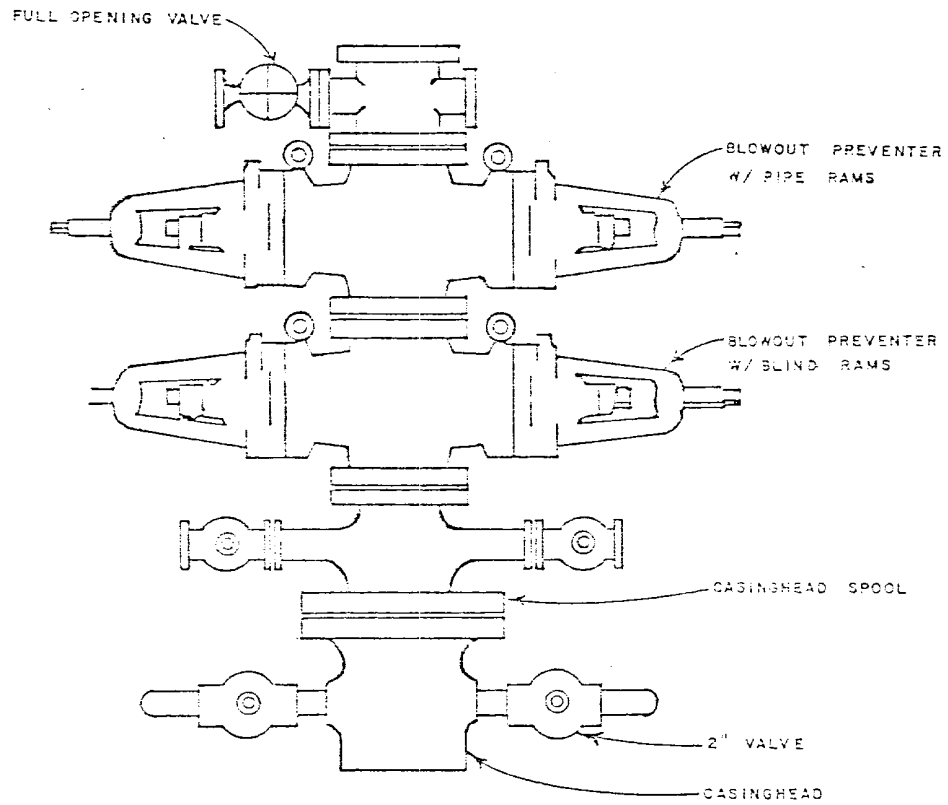
CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

*Paul C. Ellison*  
Name  
**Paul C. Ellison**  
Position  
**Production Manager**  
Company  
**Benson Mineral Group, Inc.**  
Date  
**September 8, 1978**

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed  
**September 14, 1978**  
Registered Professional Surveyor  
**3950**  
*Fred S. Kerr, Jr.*  
FRED S. KERR, JR.  
3950



**BENSON  
MINERAL  
GROUP, INC.**

3200 Anaconda Tower  
555 17th Street  
Denver, Colorado 80202

STANDARD BLOWOUT PREVENTER  
ASSEMBLY  
6" 900 SERIES

DESIGNED BY	D. E.	MODEL	APPROVED BY	DRAFTING BY
				G. W. R.

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 08-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator PITCO Production Company

Address 1790 One Williams Center, Tulsa, Oklahoma 74172

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

Other (Please explain)

If change of ownership give name and address of previous owner MCO Resources (Integrated) Corp., formerly Integrated Energy, Inc., MCC Plaza, 5718 Westheimer, Houston, Texas 77057.

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>State 36-22-6</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Rusty Chacra</u>	Kind of Lease State, Federal or Fee <u>State</u>	Lease No. <u>NM 1-1561</u>
Location Unit Letter <u>M</u> : <u>810</u> Feet From The <u>South</u> Line and <u>800</u> Feet From The <u>West</u>				
Line of Section <u>36</u> Township <u>22N</u> Range <u>6W</u> , NMPM, <u>Sandoval</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Texaco Oils Inc.</u>	<u>P. O. Box 52332, Houston, Texas 77052</u>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	<u>Yes</u> <u>10/82</u>

If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Rick Couch (Signature)  
Landman  
(Title)  
March 25, 1986  
(Date)

MAR 28 1986  
OIL CON. DIV.  
DIST. 3

OIL CONSERVATION DIVISION

APPROVED MAR 28 1986  
BY Frank J. [Signature]  
TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

#### IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		
<b>TUBING, CASING, AND CEMENTING RECORD</b>								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

#### V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

#### GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

**PITCO PRODUCTION COMPANY**

<b><u>API #</u></b>	<b><u>PROPERTY NAME</u></b>	<b><u>NUMBER</u></b>	<b><u>LOCATION</u></b>
30-043-20386	State 36-22-6	1	M-36-22N-06W



NEW MEXICO ENERGY, MINERALS  
& NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION  
AZTEC DISTRICT OFFICE  
1000 RIO BRAZOS ROAD  
AZTEC, NEW MEXICO 87410  
(505) 334-6178 Fax (505) 334-6170

GARY E. JOHNSON  
GOVERNOR

JENNIFER A. SALISBURY  
CABINET SECRETARY

June 6, 1997

Pitco Prod Co  
1790 One Williams Ctr  
Tulsa OK 74172

*M- 36-22-N-6W<sup>1</sup>  
State 36-22-6 #1*

RE: Inactive Wells

To Whom It May Concern:

Our records indicate that the wells on the attached list are inactive and not in compliance with Rule #201.B.

Please submit plans to bring these wells into compliance within 30 days. Review Rules #202 and #203 for the necessary filing requirements to plug and abandon or temporarily abandon these wells.

Contact this office if you have any questions.

Sincerely,

Johnny Robinson  
Deputy O&G Inspector

JR/sh

attachment

XC: TA File JDR File Well Files

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED  
MAR 14 1985

I.

Operator **MCO RESOURCES (INTEGRATED) CORP.**

Address **5718 WESTHEIMER, SUITE 1100, HOUSTON, TX 77057**

Reason(s) for filing (Check proper box):  
☐ New Well  
☐ Recompletion  
☐ Change in Ownership  
☐ Change in Transporter of:  
☐ Oil  
☐ Casinghead Gas  
☒ Dry Gas  
☐ Condensate  
 Other (Please explain) **CHANGE OPERATOR NAME**

If change of ownership give name and address of previous owner **INTEGRATED ENERGY, INC., P. O. BOX 61585, HOUSTON, TX 77208**

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>STATE 36-22-6</b>	Well No. <b>1</b>	Pool Name, including Formation <b>Acistly CHACRA</b>	Kind of Lease State, Federal or Fee <b>STATE</b>	Lease No. <b>ST. NM L-1561</b>
Location Unit Letter <b>M</b> ; <b>810</b> Feet From The <b>South</b> Line and <b>800</b> Feet From The <b>West</b> Line of Section <b>36</b> Township <b>22N</b> Range <b>6W</b> NMPM, <b>SANDOVAL</b> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<b>TEXACO OIL INC.</b>	<b>P. O. BOX EE, CORTEZ, CO. 81321</b>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? <b>YES</b> When <b>10/82</b>

If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

*Jane Ashcraft*  
(Signature) **JANE ASHCRAFT**  
PRODUCTION ANALYST  
(Title)  
**MARCH 7, 1985**  
(Date)

OIL CONSERVATION DIVISION

APPROVED *Frank J. [Signature]* MAR 14 1985  
BY \_\_\_\_\_  
TITLE **SUPERVISOR DISTRICT # 3**

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.



#### IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth			
Perforations						Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			

#### V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

#### GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-101  
Revised 10

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OPERATOR	

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee
5. State Oil & Gas Lease No.	
St. NM-L-1561	

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 -" (FORM C-101) FOR SUCH PROPOSALS.

1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	7. Unit Agreement Name
2. Name of Operator	8. Farm or Lease Name
Integrated Energy Inc.	State 36-22-6
3. Address of Operator	9. Well No.
P. O. Box 61585, Houston, Texas 77208-9990	1
4. Location of Well	10. Field and Pool, or Wildcat
UNIT LETTER M 810 FEET FROM THE South LINE AND 800 FEET FROM West LINE, SECTION 36 TOWNSHIP 22N RANGE 6W NMPM.	Chacra
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
7010 GR	Sandoval

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Change of Operator

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING
COMMENCE DRILLING OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER <input type="checkbox"/> Change of Operator	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.

Request permission to change operators name from Benson Mineral Group, Inc. to Integrated Energy Inc.

State 36-22-6#1 was completed 8-19-79 as a gas well and has been shut in pending a pipeline connection. To date, well is not connected to a pipeline.



8. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

NAME Claine Hylleberg TITLE Regulatory & Production Supv DATE 2/12/82

PROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

**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 -" (FORM C-101) FOR SUCH PROPOSALS.)

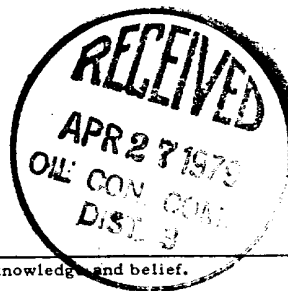
1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
2. Name of Operator <u>Benson Mineral Group, Inc.</u>		5. State Oil & Gas Lease No. <u>ST. NM-L-1561</u>
3. Address of Operator <u>555 17th St. 3200 Anaconda Tower, Denver, CO 80202</u>		7. Unit Agreement Name
4. Location of Well UNIT LETTER <u>M</u> , <u>810</u> FEET FROM THE <u>South</u> LINE AND <u>800</u> FEET FROM THE <u>West</u> LINE, SECTION <u>36</u> TOWNSHIP <u>22N</u> RANGE <u>6W</u> NMPM.		8. Farm or Lease Name <u>State 36-22-6</u>
15. Elevation (Show whether DF, RT, GR, etc.)		9. Well No. <u>1</u>
		10. Field and Pool, or Wildcat <u>Rusty Chacra</u>
		12. County <u>Sandoval</u>

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <u>Fracturing</u> <input checked="" type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

3-23-79: Set frac tank.  
4-13-79: Haul 1900' 2 3/8" tubing to location.  
4-17-79: Foam frac with 30,000# sand and 15,000 gal. foam.  
4-19-79: SI waiting to run tubing.



RECEIVED  
APR 26 1979  
U. S. GEOLOGICAL SURVEY  
DENVER, COLO.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Paul C. Ellison TITLE Production Manager DATE April 24, 1979

Original Signed by A. R. Kendrick SUPERVISOR DIST. 33 DATE APR 27 1979

CONDITIONS OF APPROVAL, IF ANY:

# REPORT OF PROOF OF APPARENT DEVIATION

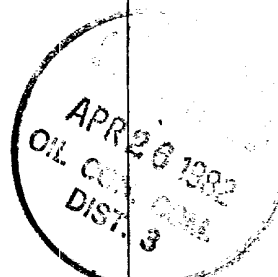
*Integrated Energy*  
Benson Mineral Group, Inc.

Operator \_\_\_\_\_ Lease No. ST NM-L-1561

FIELD Chacra County, ST Sandoval, NM

Lease Name & Well No. State 36-22-6 #1 SEC. 36 T 22N R 6W

Degrees Deviation	Deviation Factor	DEGREES DEVIATION	DEPTH FROM SURFACE	LENGTH OF INTERVAL	DEVIATION FACTOR	DEVIATION OF INTERVAL	CUMULATIVE APPARENT DEVIATION	REMARKS
1/4	.00436							
1/4	.00873	1°	500	500	.01745	8.725	8.725	
1/4	.01309	3/4°	2000	1500	.01309	19.635	28.36	
1	.01745							
1 1/4	.02182							
1 1/4	.02618							
1 1/4	.03054							
2	.03490							
2 1/4	.03926							
2 1/4	.04362							
2 1/4	.04798							
3	.05234							
3 1/4	.05669							
3 1/4	.06105							
3 1/4	.06540							
4	.06976							
4 1/4	.07411							
4 1/4	.07846							
4 1/4	.08281							
5	.08716							
5 1/4	.09150							
5 1/4	.09585							
5 1/4	.10019							
6	.10453							
6 1/4	.10887							
6 1/4	.11320							
6 1/4	.11754							
7	.12187							
7 1/4	.12620							
7 1/4	.13053							
7 1/4	.13485							
8	.13917							
8 1/4	.14349							
8 1/4	.14781							
8 1/4	.15212							
9	.15643							
9 1/4	.16074							
9 1/4	.16505							
9 1/4	.16935							
10	.17365							



ATTEST:

*F. Michael Murphy*  
F. Michael Murphy, Secretary

Title President

Date 8-19-79

Certified as Being True & Correct by \_\_\_\_\_

CORPORATE ACKNOWLEDGMENT

STATE OF COLORADO           )  
                                      )  
CITY AND COUNTY OF DENVER ) ss.

On 6-30-78, before me personally came the above named  
Bruce D. Benson (who being by me duly sworn did say that he is the \_\_\_\_\_ President of  
Benson Mineral Group, Inc., a corporation, and that the seal affixed to said instru-  
ment is the corporate seal of said corporation) who is personally known to me to be  
the identical person and officer whose name is affixed to the above instrument as \_\_\_\_\_  
President of said corporation, and acknowledged the instrument to be his free and  
voluntary act and deed and the free and voluntary act and deed of said corporation;  
that said corporation executed said instrument and that said instrument was executed,  
signed and sealed on behalf of said corporation by authority of its board of  
directors or by authority of its by-laws.

My Commission Expires  
July 25, 1982

*Wendy M. T. [Signature]*  
Notary Public

## INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Commission not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, Items 30 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1165.

**INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE**

### Southeastern New Mexico

### Northwestern New Mexico

T. Anhy _____	T. Canyon _____	T. Ojo Alamo _____	T. Penn. "B" _____
T. Salt _____	T. Strawn _____	T. Kirtland-Fruitland _____	T. Penn. "C" _____
B. Salt _____	T. Atoka _____	T. Pictured Cliffs _____	T. Penn. "D" _____
T. Yates _____	T. Miss _____	T. Chacra _____	T. Leadville _____
T. 7 Rivers _____	T. Devonian _____	T. Cliff House _____	T. Madison _____
T. Queen _____	T. Silurian _____	T. Menefee _____	T. Elbert _____
T. Grayburg _____	T. Montoya _____	T. Mancos _____	T. McCracken _____
T. San Andres _____	T. Simpson _____	T. Gallup _____	T. Ignacio Qtzte _____
T. Glorieta _____	T. McKee _____	T. Base Greenhorn _____	T. Granite _____
T. Paddock _____	T. Ellenburger _____	T. Dakota _____	T. _____
T. Blinebry _____	T. Gr. Wash _____	T. Morrison _____	T. _____
T. Tubb _____	T. Granite _____	T. Todilto _____	T. _____
T. Drinkard _____	T. Delaware Sand _____	T. Entrada _____	T. _____
T. Abo _____	T. Bone Springs _____	T. Wingate _____	T. _____
T. Wolfcamp _____	T. _____	T. Chinle _____	T. _____
T. Penn. _____	T. _____	T. Permian _____	T. _____
T. Cisco (Bough C) _____	T. _____	T. Penn. "A" _____	T. _____

## OIL OR GAS SANDS OR ZONES

No. 1, from \_\_\_\_\_ to \_\_\_\_\_

No. 2, from \_\_\_\_\_ to \_\_\_\_\_

No. 3, from \_\_\_\_\_ to \_\_\_\_\_

No. 4, from \_\_\_\_\_ to \_\_\_\_\_

No. 5, from \_\_\_\_\_ to \_\_\_\_\_

No. 6, from \_\_\_\_\_ to \_\_\_\_\_

## IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from.....to.....feet. ....

No. 2, from.....to.....feet. ....

No. 3, from.....to.....feet. ....

No. 4, from.....to.....feet. ....

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation

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OPERATOR	1

# NEW MEXICO OIL CONSERVATION COMMISSION WELL COMPLETION OR RECOMPLETION REPORT AND LOG

Form C-105  
Revised 11-1-78

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. St. NM-L-1561

1a. TYPE OF WELL OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> OTHER <input type="checkbox"/>
b. TYPE OF COMPLETION NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> OTHER <input type="checkbox"/>

7. Unit Agreement Name
8. Farm or Lease Name State 36-22-6

2. Name of Operator Benson Mineral Group, Inc.
3. Address of Operator 3200 Anaconda Tower, 555 17th St., Denver, CO 80202

9. Well No. 1
------------------

4. Location of Well UNIT LETTER M LOCATED 810 FEET FROM THE South LINE AND 800 FEET FROM THE West LINE OF SEC. 36 TWP. 22N RGE. 6W NMPM
--

10. Field and Pool, or Wildcat Chacra
--

15. Date Spudded 10-7-78	16. Date T.D. Reached 10-10-78	17. Date Compl. (Ready to Prod.) 8-19-79	18. Elevations (DF, RKB, RT, GR, etc.) 7010 GR	19. Elev. Casinghead
-----------------------------	-----------------------------------	---	---	----------------------

12. County Sandoval
------------------------

20. Total Depth 2000'	21. Plug Back T.D. 1894'	22. If Multiple Compl., How Many Single	23. Intervals Drilled By Rotary Tools Surf-TD	Cable Tools
--------------------------	-----------------------------	--	---	-------------

25. Was Directional Survey Made NO
---------------------------------------

24. Producing Interval(s), of this completion - Top, Bottom, Name 1795-1831 Chacra
---

26. Type Electric and Other Logs Run IES, FDC	27. Was Well Cored NO
--	--------------------------

28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
7"	20#	97'	9 7/8"	50 sx cmt	
4 1/2"	9.5#	1983'	6 1/4"	240 sx cmt	

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET
None					2 3/8"	1856'	None

31. Perforation Record (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
1795-1805; 1811-1823'; 1826-1831' x 2 SPF		DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
		1795-1831	15,000 gal 70 quality foam
			30,000# 10-20 sand

33. PRODUCTION							
Date First Production SI		Production Method (Flowing, gas lift, pumping - Size and type pump) Pumping				Well Status (Prod. or Shut-in) SI	
Date of Test 8-19-79	Hours Tested 24	Choke Size 1/2"	Prod'n. For Test Period →	Oil - Bbl. 0	Gas - MCF 68	Water - Bbl. 34	Gas - Oil Ratio --
Flow Tubing Press. Pumping	Casing Pressure 3.9 psig	Calculated 24-Hour Rate →	Oil - Bbl. --	Gas - MCF 68	Water - Bbl. 34	Oil Gravity - API (Corr.) --	

34. Disposition of Gas (Sold, used for fuel, vented, etc.) To be sold	Test Witnessed By M. L. Ellsaesser
--	---------------------------------------

35. List of Attachments
-------------------------

36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.		
SIGNED Paul C. Ellison	TITLE Production Manager	DATE Oct. 5, 1979

BENSON  
MINERAL  
GROUP, INC.

October 5, 1979

Mr. Joe D. Ramey, Director  
Oil Conservation Commission  
State of New Mexico  
P.O. Box 2088  
Santa Fe, NM 87501

Dear Mr. Ramey:

This letter is to inform you that the following wells are  
capable of producing gas in commercial quantities:

M Federal 17-22-6 #1, Sandoval County, New Mexico  
State 36-22-6 #1, Sandoval County, New Mexico AOF 68 MCFPD

Gas from the above wells is not dedicated.

Sincerely,

BENSON MINERAL GROUP, INC.



Paul C. Ellison  
Production Manager

PCE/pms  
cc: A. R. Kendrick





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# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. St.-NM-L-1561
7. Unit Agreement Name
8. Farm or Lease Name State 36-22-6
9. Well No. 1
10. Field and Pool, or Wildcat Rusty Chacra
12. County Sandoval

**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 -" (FORM C-101) FOR SUCH PROPOSALS.)

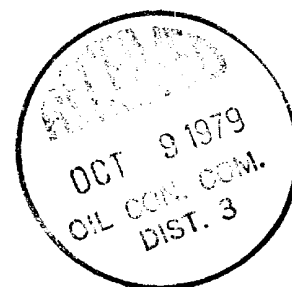
1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER-
2. Name of Operator Benson Mineral Group, Inc.
3. Address of Operator 3200 Anaconda Tower, 555 17th St., Denver, CO 80202
4. Location of Well UNIT LETTER M, 810 FEET FROM THE South LINE AND 800 FEET FROM THE West LINE, SECTION 36 TOWNSHIP 22N RANGE 6W NMPM.
15. Elevation (Show whether DF, RT, GR, etc.)

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

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	Status Report <input checked="" type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

7-2-79: Ran 2 x 1 1/2" pmp and 5/8" rods.  
7-21-79: Set pumping and made connections.  
8-14-79: Pmp test well.  
8-29-79: Pmp test well. Set up orifice well tester to meter gas. Waiting on charts from contract pumper.



18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Paul C. Ellison TITLE Production Manager DATE Oct. 3, 1979  
APPROVED BY at Kendrick TITLE SUPERVISOR DISTRICT # 3 DATE MAR 18 1980  
CONDITIONS OF APPROVAL, IF ANY:

DISTRIBUTION	3
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# NEW MEXICO OIL CONSERVATION COMMISSION

Supplement to  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. St. NM-L-1561	

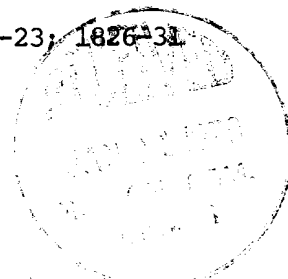
## SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER- <input type="checkbox"/>		7. Unit Agreement Name
2. Name of Operator Benson Mineral Group, Inc.		8. Farm or Lease Name State 36-22-6
3. Address of Operator 3200 Anaconda Tower, 555 17th Street, Denver, CO 80202		9. Well No. 1
4. Location of Well UNIT LETTER M 810 FEET FROM THE South LINE AND 800 FEET FROM West 36 TOWNSHIP 22N RANGE 6W NMPM.		10. Field and Pool, or Wildcat Rusty Chacra
15. Elevation (Show whether DF, RT, GR, etc.) 7010 GR.		12. County Sandoval

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER Perforating <input checked="" type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

11-15-78: Do dirt work, clean up site.  
11-21-78: Set ground ankers.  
11-28-78: Fence reserve pits.  
12-22-78: Backfill reserve pits.  
1-22-78: Repair road.  
1-24-78: Ran GRC log. PBTD 1894'. Perf 1795-1805'; 1811-23, 1826-31 with 2 shots per foot.



18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Paul C. Ellison TITLE Production Manager DATE January 26, 1979

Original Signed by A. R. Kendrick

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE JAN 31 1979

CONDITIONS OF APPROVAL, IF ANY:

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**MULTIPOINT AND ONE POINT BACK PRESSURE TEST FOR GAS WELL**

Form C-122  
 Revised 9-1-65

Type Test <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Annual <input type="checkbox"/> Special						Test Date 8-19-79	
Company Benson				Connection None			
Pool Chacra				Formation Chacra		Unit	
Completion Date 8-19-79		Total Depth 2000'		Plug Back TD 1894'		Elevation 7010'	
Casing Size 4 1/2"		Wt. 9.5#		Set At 1983		Perforations: From 1795 To 1831	
Fig. Size 2 3/8"		Wt. 4.7#		Set At 1856'		Perforations: open-ended From To	
Type Well - Single - Bradenhead - G.G. or G.O. Multiple Single						Packer Set At None	
Producing Thru casing		Reservoir Temp. °F 60		Mean Annual Temp. °F 60		Baro. Press. - P <sub>a</sub>	
L 1983		H .60		G <sub>g</sub>		% CO <sub>2</sub>	
				% N <sub>2</sub>		% H <sub>2</sub> S	
				Prover		Meter Run	
						Taps	

FLOW DATA						TUBING DATA		CASING DATA		Duration of Flow	
NO.	Prover Line Size	X	Orifice Size	Press. p.s.i.g.	Diff. h <sub>w</sub>	Temp. °F	Press. p.s.i.g.	Temp. °F	Press. p.s.i.g.		Temp. °F
1	1 month					60	0	60	370	60	30 days
2	2" x 1/2"			3.9			0		3.9		24 hrs.
3							(pumping)				
4											
5											

RATE OF FLOW CALCULATIONS							
NO.	Coefficient (24 Hour)	$\sqrt{h_w P_m}$	Pressure P <sub>m</sub>	Flow Temp. Factor Ft.	Gravity Factor F <sub>g</sub>	Super Compress. Factor, F <sub>pv</sub>	Rate of Flow Q, Mcfd
1			3.9	1.0	1.0	1.0	68
2							
3							
4							
5							

NO.	P <sub>r</sub>	Temp. °R	T <sub>r</sub>	Z	Gas Liquid Hydrocarbon Ratio _____ Mcf/bbl.
1.					A.P.I. Gravity of Liquid Hydrocarbons _____ Deg.
2.					Specific Gravity Separator Gas _____ X X X X X X X X
3.					Specific Gravity Flowing Fluid _____ X X X X X
4.					Critical Pressure _____ P.S.I.A. _____ P.S.I.A.
5.					Critical Temperature _____ °R _____ °R

NO.	P <sub>r</sub>	P <sub>w</sub>	P <sub>w</sub> <sup>2</sup>	P <sub>r</sub> <sup>2</sup> - P <sub>w</sub> <sup>2</sup>	(1) $\frac{P_r^2}{P_r^2 - P_w^2} = \frac{145924}{145671.19}$	(2) $\left[ \frac{P_r^2}{P_r^2 - P_w^2} \right]^n = \frac{1.001}{1}$
1	382	15.9	252.8	145671.19		
2						
3						
4						
5						

Absolute Open Flow _____ 68 _____ Mcfd @ 15.025		Angle of Slope _____		Slope, n _____ 85	
---	--	----------------------	--	-------------------	--

Remarks: Well was pump tested

Approved By Commission:	Conducted By: Kurt Nelson	Calculated By: Sue Johnson	Checked By: Paul C. Ellison
-------------------------	------------------------------	-------------------------------	--------------------------------

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# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
St. NM-L-1561	

## SUNDY 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 -" (FORM C-101) FOR SUCH PROPOSALS.)

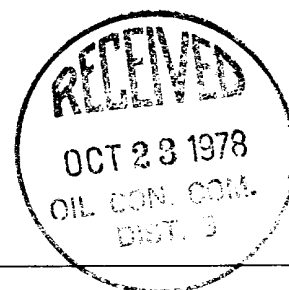
1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		7. Unit Agreement Name	
2. Name of Operator Benson Mineral Group, Inc.		8. Farm or Lease Name State 36-22-6	
3. Address of Operator 3200 Anaconda Tower, 555 17th Street, Denver, CO 80202		9. Well No. 1	
4. Location of Well UNIT LETTER M, 810 FEET FROM THE South LINE AND 800 FEET FROM THE West LINE, SECTION 36 TOWNSHIP 22N RANGE 6W NMPM.		10. Field and Pool, or Wildcat Rusty Chacra	
15. Elevation (Show whether DF, RT, GR, etc.) 7010 GR		12. County Sandoval	

## 16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

10-7-78: Spud.  
10-8-78: 7" Surface casing set at 97' GR with 50 sacks cement, circulate. Pressure test casing to 600 psi. OK.  
10-10-78: TD 2000'.  
10-11-78: Log. 4½" production casing set at 1983' with 240 sacks cement, circulate. Pressure test casing to 2500 psi. OK.



18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Paul C. Ellison TITLE Production Manager DATE October 20, 1978

Original Signed by A. R. Kendrick

APPROVED BY \_\_\_\_\_ TITLE SUPERVISOR DIST. #3 DATE OCT 23 1978

CONDITIONS OF APPROVAL, IF ANY:

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

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OPERATOR	
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REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. OPERATOR

Operator Integrated Energy Incorporated

Address P.O. Box 61585, Houston, Texas 77208

Reason(s) for filing (Check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

If change of ownership give name and address of previous owner Benson Minerals Group Inc

## II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>State 36-22-6</u>	Well No. <u>1</u>	Pool Name, Including Formation <u>WC Chacra</u>	Kind of Lease State, Federal or Fee State	Lease No. <u>St. NM-L-1561</u>
Location				
Unit Letter <u>M</u>	<u>810</u>	Feet From The <u>South</u>	Line and <u>800</u>	Feet From The <u>West</u>
Line of Section <u>36</u>	Township <u>22N</u>	Range <u>6W</u>	<u>NMPM</u>	<u>Sandoval</u> Count

## III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>DOMESTIC PETROLEUM</u>	<u>1625 Broadway Suite 2900 Denver Co 80202</u>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
	<u>No</u>

If this production is commingled with that from any other lease or pool, give commingling order number:

## IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudded <u>10/7/78</u>	Date Compl. Ready to Prod. <u>8/19/79</u>	Total Depth <u>2000'</u>	P.B.T.D. <u>1894'</u>					
Elevations (DF, RKB, RT, GR, etc.) <u>7010 GR</u>	Name of Producing Formation <u>Chacra</u>	Top Oil/Gas Pay <u>1795'</u>	Tubing Depth <u>1856'</u>					
Perforations <u>1795-1805;1811-23;1826-31 @ 2 SPF</u>			Depth Casing Shoe <u>1983'</u>					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
<u>9 7/8"</u>	<u>7", 20#</u>	<u>97'</u>	<u>50</u>					
<u>6 1/4"</u>	<u>4 1/2", 9.5#</u>	<u>1983'</u>	<u>240</u>					
	<u>2 3/8" tubing</u>	<u>1856'</u>						

## V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

## GAS WELL

Actual Prod. Test - MCF/D <u>68</u>	Length of Test <u>24 hr.</u>	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.) <u>Pumping</u>	Tubing Pressure (Shut-in) <u>NA</u>	Casing Pressure (Shut-in) <u>3.9 psig 370</u>	Choke Size <u>1/2"</u>

## VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Terence J. Casey  
(Signature)  
Terence J. Casey, Executive Vice President  
(Title)  
20 April 1982  
(Date)

## OIL CONSERVATION DIVISION

APPROVED APR 26 1982, 19  
BY Frank J. Casey  
TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviated tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Form C-104 must be filed for each pool in multiphase completed wells.