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DISTRICT I
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## State of New Mexico E. ...gy, Minerais and Natural Resources Department

DISTRICT II
P.O. Drawer DD., Artesia, NM 88210

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brizos Rd., Azzac, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

| L  | 11200   |                | NSPORT          |                           |   |   |                        |                       |         |  |  |
|--|---|----------------|-----------------|---------------------------|---|---|------------------------|-----------------------|---------|--|--|
| Operator   |   | Well API No.   |                 |                           |   |   |                        |                       |         |  |  |
| Benson Montin  | Benson Montin Greer Drilling Corp.            |                |                 |                           |   | 30-039-23614                                  |                        |                       |         |  |  |
| 221 Petroleum  | Contor  | Buildir        | o Formin        | atan Vo                   | y Morri oo  | 87401   |                        |                       |         |  |  |
| Reason(s) for Filing (Check proper box)  | Center i                                      | <u>bulluli</u> | ig, raimir      |                           | her (Please exp   |   |                        | <u> </u>              |         |  |  |
| New Weil   |   |                | Transporter of: | , —                       |   |   |                        |                       |         |  |  |
| Recompletion   | Oil<br>Conincton                              |                | Dry Gas         |                           |   |   |                        |                       |         |  |  |
| If change of operator give name  |   |                | Condenses       |                           |   |   |                        |                       |         |  |  |
| and address of previous operator Oryx Energy Company, P.O. Box 26300, Oklahoma City, O.K. 73126-0300   |   |                |                 |                           |   |   |                        |                       |         |  |  |
| IL DESCRIPTION OF WELL   | AND LE  |                |                 |                           | ·   | T   |                        | <del>,</del>          |         |  |  |
| Native Son "B"   | Well No.   Pool Name, includ                  |                | -               | 1                         | Kind (  | Less No.  Late Federal or Fee NMNM23038       |                        |                       |         |  |  |
| Location   |   |                | - SGVIIIII      | Hancos                    |   |   |                        | i iiiiii              |         |  |  |
| Unit LetterI   | _ :185  | 0              | Feet From The   | South Li                  | 79 and  | 90 <b>F</b> e                                 | et From The            | East                  | Line    |  |  |
| Section 33 Townshi   | . 25M   |                | _ 217           |                           |   |   | Dia Asses              | :1                    |         |  |  |
| Section 3.3 Township   | ip 25N  | <del> </del>   | Range 2W        | , P                       | IMPM,   | <del></del>                                   | Rio Arri               | rba C                 | ounty   |  |  |
| III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS   |   |                |                 |                           |   |   |                        |                       |         |  |  |
| Name of Authorized Transporter of Oil  |   |                |                 |                           |   |   |                        | •                     |         |  |  |
| Ciniza Pipeline, Inc.  |   |                |                 |                           | P.O. Box 1887, Bloomfield, N.M. 87413  Address (Give address to which approved copy of this form is to be seet) |   |                        |                       |         |  |  |
| Benson-Montin-Greer Dr   | -   |                |                 |                           |   |   | g.,Farmington,NM 87401 |                       |         |  |  |
| If well produces oil or liquids,   | -   |                | Twp. Rg         |                           | is gas actually connected? When ?   |   |                        |                       |         |  |  |
| give location of tanks.  | <u>i I                                   </u> | 33             | 25N   2W        | yes                       | <u></u>   |   |                        | <del></del>           |         |  |  |
| If this production is commingled with that from any other lease or pool, give comminging order number:  IV. COMPLETION DATA  |   |                |                 |                           |   |   |                        |                       |         |  |  |
|  |   | Oil Well       | Gas Well        | New Well                  | Workover  | Deepen  | Phug Back Sar          | ne Res'v Diff         | r Res'v |  |  |
| Designate Type of Completion   |   | 1              |                 | 1                         | <u> </u>  |   |                        |                       |         |  |  |
| Date Spudded Date Compi. Ready   |   |                | Prod.           | Total Debru               | Total Depth   |   | P.B.T.D.               |                       |         |  |  |
| Elevations (DF, RKB, RT, GR, etc.)   | Name of Producing Formation                   |                |                 | Top Oil/Gas               | Top Oil/Gas Pay   |   |                        | Tubing Depth          |         |  |  |
|  |   |                |                 |                           |   |   |                        |                       |         |  |  |
| Perforations   |   |                |                 |                           | Depth Casing Shoe   |   |                        |                       |         |  |  |
| TUBING, CASING AND   |   |                |                 |                           | CEMENTING RECORD  |   |                        |                       |         |  |  |
| HOLE SIZE  | 1   | ING & TUE      |                 | CLIVILATI                 | DEPTH SET   |   |                        | SACKS CEMENT          |         |  |  |
|  |   |                |                 |                           |   |   |                        |                       |         |  |  |
|  | <del> </del>                                  | <del>.</del>   |                 |                           |   |   |                        |                       |         |  |  |
|  |   |                |                 |                           |   |   |                        |                       |         |  |  |
| 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 Tank    Producing Method (Figw. pump, gas lift, etc.) |   |                |                 |                           |   |   |                        |                       |         |  |  |
| Das File Few Cir Ring To Talk  | First New Oil Run To Tank Date of Test        |                |                 |                           |   | Producing Method (Flow, pump, gas lift, etc.) |                        |                       |         |  |  |
| Length of Test   | Tubing Pressure                               |                |                 | Casing Press              | ite   |   | THE CELL OF THE        |                       |         |  |  |
| And Bud Daire Tree   |   |                | W. D.           |                           |   |   | GLAMCF                 |                       |         |  |  |
| Actual Prod. During Test   | . During Test Oil - Bbls.                     |                |                 |                           | Water - Bbis.   |   |                        | 0F02 01991            |         |  |  |
| GAS WELL   | <u> </u>                                      | ·              | <del> </del>    |                           |   |   |                        | <u> i 1996.</u>       |         |  |  |
| Actual Prod. Test - MCF/D  | - MCF/D Leagth of Test                        |                |                 |                           | Bbls. Condennue/MMCF  |   |                        | Gravity of Coddensate |         |  |  |
|  |   |                |                 |                           |   |   | 847.25                 |                       |         |  |  |
| Tubing Pressure (Shut-in)  |   |                |                 | Casing Press.             | Casing Pressure (Shut-in)   |   |                        | Choke Size            |         |  |  |
| VI OPERATOR CERTIFICA  | ATE OF A                                      | COMPI          | IANCE           |                           |   |   | <del></del>            |                       |         |  |  |
| VL OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation   |   |                |                 | OIL CONSERVATION DIVISION |   |   |                        |                       |         |  |  |
| Division have been complied with and that the information given above  |   |                |                 | DEC 9 A 1001              |   |   |                        |                       |         |  |  |
| issure.and complete to the best of my knowledge and belief.  |   |                |                 |                           | Date Approved DEC 2 0 1991  |   |                        |                       |         |  |  |
| Whert Males  |   |                |                 |                           | $S = I \setminus \{Q\} \setminus I$   |   |                        |                       |         |  |  |
| Signature Albert R. Greer President  |   |                |                 |                           | By  |   |                        |                       |         |  |  |
| Printed Name Title   |   |                |                 | THE                       | Title SUPERVISOR DISTRICT # 3   |   |                        |                       |         |  |  |
| 12-19-91 505/325-8874  |   |                |                 |                           | Title SUPERVISOR DISTRICT # 3   |   |                        |                       |         |  |  |
| Date '   |   | Teleph         | one No.         |                           |   |   |                        |                       |         |  |  |

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.