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| TRANSPORTER | OIL <input checked="" type="checkbox"/> CAS <input type="checkbox"/> |
| OPERATOR | |
| PRORATION OFFICE | 3 |

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I.

Operator: **BEYNSON-MONTIN-GREER DRILLING CORP.**

Address: **158 PETROLEUM CENTER BUILDING, FARMINGTON, NEW MEXICO**

Reason(s) for filing (Check proper box) Other (Please explain)

| | | |
|--|---|--|
| New Well <input type="checkbox"/> | Change in Transporter of: | Change in Operator Change in Well Name and Number |
| Recompletion <input type="checkbox"/> | Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/> | |
| Change in Ownership <input type="checkbox"/> | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> | |

If change of ownership give name and address of previous owner **opr. R. L. Bayless, Box 1541, Farmington, New Mexico**

II. DESCRIPTION OF WELL AND LEASE

| | | | |
|--|--------------------------------|--|--|
| Lease Name JICARILLA 237 | Well No. 2 (G-29) | Pool Name, Including Formation Puerto Chiquito | Kind of Lease State, Federal or Fee Indian |
| Location Unit Letter G ; 1650 Feet From The 165 Line and 1650 Feet From The east north | | | |
| Line of Section 29 , Township 27N Range 1E , NMPM, Rio Arriba County | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | | | | |
|--|---|----------------|--------------------------------|--------------------------------------|------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Oil Company | Address (Give address to which approved copy of this form is to be sent) Box 1588, Farmington, New Mexico | | | | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> None | Address (Give address to which approved copy of this form is to be sent) | | | | |
| If well produces oil or liquids, give location of tanks. | Unit K | Sec. 29 | Twp. 27N Rge. 1E | Is gas actually connected? No | When |

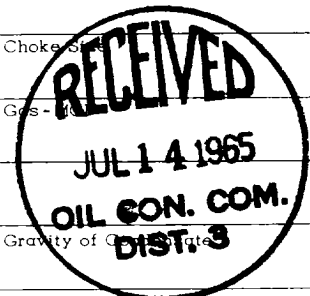
If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

| Designate Type of Completion - (X) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
|--------------------------------------|-----------------------------|----------|-----------------|----------|--------------|-------------------|-------------|--------------|
| Date Spudded | Date Compl. Ready to Prod. | | Total Depth | | P.B.T.D. | | | |
| Pool | 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 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-Bbbls. | Water-Bbbls. | Gas-Bbbls. |



GAS WELL

| | | | |
|----------------------------------|-----------------|------------------------|----------------|
| Actual Prod. Test-MCF/D | Length of Test | Bbbls. Condensate/MMCF | Gravity of Gas |
| Testing Method (pitot, back pr.) | Tubing Pressure | Casing Pressure | Choke Size |

VI. CERTIFICATE OF COMPLIANCE

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

Albert R. Kyrle
(Signature)
Vice-President
(Title)
July 12, 1965
(Date)

OIL CONSERVATION COMMISSION
APPROVED **JUL 14 1965**, 19_____
BY **Original Signed By**
A. R. KENDRICK
TITLE **PETROLEUM ENGINEER DIST. NO. 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 Sections I, II, III, and VI only 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.