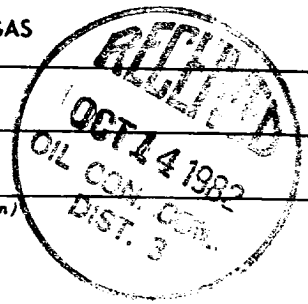


OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

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U.S.U.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

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



I. Operator
INTEGRATED ENERGY INC.
Address
P.O. BOX 61585 - HOUSTON, TEXAS 77208
Reason(s) for filing (Check proper box)
New Well Change in Transporter of:
Recompletion Oil Dry Gas
Change in Ownership Casinghead Gas Condensate

If change of ownership give name and address of previous owner **BENSON MINERAL GROUP, INC.** 1726 Champa Street, Ste. 600 Denver, Colorado 80202

II. DESCRIPTION OF WELL AND LEASE

Lease Name FEDERAL 25-22-7	Well No. 1	Pool Name, Including Formation RUSTY CHACRA EX1	Kind of Lease State, Federal or Fee	Lease No. NM-8899
Location Unit Letter B : 1060' Feet From The NORTH Line and 1470' Feet From The EAST Line of Section 25 Township 22N Range 7W , NMPM, Sandoval 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)			
DOME PETROLEUM CORPORATION	1625 Broadway St., Ste. 2900- Denver, Colo 80202			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.
				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 Restv.	Diff. Res
		XX	XX					
Date Spudded 10/25/78	Date Compl. Ready to Prod. 9/17/82	Total Depth 1770' MD	P.B.T.D. 1728' MD					
Elevations (DF, RKB, RT, GR, etc.) 6838' GR	Name of Producing Formation RUSTY CHACRA	Top Oil/Gas Pay 1608'	Tubing Depth 1594'					
Perforations 1608' - 1688'			Depth Casing Shoe 1768'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		
9-5/8"	7"		100'			50		
6-1/4"	4-1/2"		1768'			230		
	1-1/2"		1594'					

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 236 MCF 223 MCF/D	Length of Test 3 hrs.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) flowing	Tubing Pressure (shut-in) 463	Casing Pressure (shut-in) 464	Choke Size 3/4"

I. 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.

Shelley R. Swartzenduber
(Signature)
REGULATORY AGENT (Title)
10/12/82
(Date)

OIL CONSERVATION DIVISION

10-18-82 **OCT 18 1982**
APPROVED _____, 19____
BY Original Signed by FRANK E. CHAVEZ
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 Forms C-104 must be filed for each pool in multiple completed wells.