Submit 5 Copies
Approvinate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Bettom of Page

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 Brazos Rd., Azzec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.						AUTHOR ATHRAL (
Operator	Ο	IL AND NATURAL GAS Well API No.									
genson Montin G	reer Drilli	ing Cor	р.					30 - 039-236	512		
Address								-			
221 Petroleum Ce	enter Bldg.	. Farm	ingtor	<u>a. Ne</u>							
Reason(s) for Filing (Check proper b		Change in T	·=====	of:	O	her (Please ex	piain)				
Recompletion	Oil ,		ramsporter Dry Gas								
Change in Operator	Casinghead		-	ī							
If change or operator give name					D 262	00 01-1 -	1	O II	72126	0200	
and address of previous operator	Oryx Energ	y compa	any, P	.0.	BOX 203	oo, okla	noma Cl	cy, O.K.	73126-	0300	
II. DESCRIPTION OF WE	LL AND LEAS	SE									
Lease Name Full Sail "A"		Well No. Pool Name, inch			1			Godeni de Fina			
Location		2 Gavilan			Mancos			Federal or Fee NM23039			
_	7.					_			_		
Unit Letter	:	<u>650 </u>	eet From	The	South Li	ne and	90I	eet From The	East	Line	
Section 28 Town	machip 25N	_ R	ange	2W	. N	IMPM.		Rio Arr	iba	County	
III. DESIGNATION OF TR	ANSPORTER			IATU.							
Name of Authorized Transporter of C	yı 🔀 o	or Condensa]	1			d copy of this for			
Ciniza Pipeline					P.O. Box 1887, Bloomfield, N.M. 87413						
Name of Authorized Transporter of Casinghead Gas					Address (Give address to which approved copy of this form is to be sent)						
Benson-Montin-Greer If well produces oil or liquids.	enson-Montin-Greer Drilling Corp. well produces out or liquids, Unit Sec. Twp. Re							Farmington.NM 87401			
give location of tanks.		28		e rge. 2W	-	y connected?	Whe	a r			
f this production is commingled with					ves	ber:					
V. COMPLETION DATA			, 🚜						-		
Designate Type of Complete		Oil Well	Gas V	Vell	New Well	Workover	Deepen	Plug Back Sa	ume Res'v	Diff Res'v	
Date Spudded	Date Compi.	Ready to Pr	od.		Total Depth	L	<u> </u>	P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation				-	Top Oil/Gas	Pay		Tubing Depth			
Perforations		-					Depth Casing Shoe				
											
	TUBING, CASING AND				CEMENTI			OACUS OFFICE			
HOLE SIZE	CASIN	CASING & TUBING SIZE			DEPTH SET			SAC	SACKS CEMENT		
											
											
	- 	71.4				-			-		
. TEST DATA AND REQU	EST FOR AL	LOWAB	LE					1			
OIL WELL (Test must be after	er recovery of total	volume of le	oad oil and	i must b	se equal to or	exceed top allo	owable for thi	s depth or be for	full 24 hour	3.)	
Date First New Oil Run To Tank	Date of Test				Producing Me	thod (Flow, pu	ump, gas lift, e	etc.)			
									PP		
ength of Test	Tubing Pressur	re			Casing Pressu	TE.		Charle Species	in the	-3 1/1 E-10 A	
count Prod. During Test	Oil - Bbls.	il - Rhie			Water - Bbis.			Gas-MCF	ECO A	1001	
real flot During feat	Oil - Bbis.			ŀ	MATEL - DOIR			on me.	EC2 0	1991,	
GAS WELL	<u></u>							OII	CON	i. DIV.	
SAS WELL Letter Prod. Test - MCF/D	Length of Test	<u> </u>		·	Bbis. Conden	nate/MMCF	_	Gravity of Cond			
.											
sting Method (pitot, back pr.)	Tubing Pressur	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size			
											
L OPERATOR CERTIFI	CATE OF C	OMPLL	ANCE			W 005		ATIONI DI	VICIO	N1	
I hereby certify that the rules and reg						AL CON	19FH A	ATION DI	A1210	1.4	
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					Date Approved DEC 2 0-1991						
is district confines in the period in	, monstage and of	ин.			Date	Approve	للحوه	EU (V)	331		
Mhen &	M M	21	Q ~				8.1](U)	. /		
Signature	HA A		<u> </u>	-	Ву		11 m	11 · Sav	*/		
Albert R. Greer	Pre	esident	<u> </u>	_	•		UDEB\#66	ים מופדסופים	. # 2		
Printed Name	501	Titl	-		Title_	SI	UPERVISC	R DISTRICT	# 3 		
12-19-91 Date	505	5/325-8 Telephon		-							
-				11							

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.