'NO OF CODISE DEC	6	
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SANTA FE		1
FILE		1
U.S.G.S.		
LAND OFFICE		T
IRANSPORTER	OIL	7
	GAS	
OPERATOR	ATOR	
PRORATION OFFICE		

September 21, 1967

SANTA FE		FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-110	
FILE		AND	Effective 1-1-65	
U.S.G.S.	AUTHORIZATION TO TRA	INSPORT OIL AND NATURAL (	GAS	
LAND OFFICE	_			
TRANSPORTER OIL /	_			
OPERATOR 3	-			
PRORATION OFFICE				
Operator				
	BENSON-MONTIN-GREER DRIL	LLING CORP.		
Address				
	221 Petroleum Center But	Ilding, Farmington, New	Mexico	
Reason(s) for filing (Check proper be	(x)	Other (Please explain)		
New Well Recompletion	Change in Transporter of: Oil Y Dry Gar			
Change in Ownership	Casinghead Gas Conden			
If change of ownership give name				
and address of previous owner				
. DESCRIPTION OF WELL ANI	LEASE			
Lease Name	Well No. Pool Nar	me, Including Formation	Kind of Lease	
PUERTO CHIQUITO UNIT		to Chiquito Mancos	State, Federal or Fee <b>Fee</b>	
Location	(- 0)	·		
Unit Letter;;	980 Feet From The <b>South</b> Lin	e and 660 Feet From	TheEast	
Line of Section 8, T	ownship 26N Range 1	E , NMPM, Rio Ar	County County	
DESIGNATION OF TRANSPOL	RTER OF OIL AND NATURAL GA	ıs		
Name of Authorized Transporter of C		Address (Give address to which appro-	ved copy of this form is to be sent)	
Benson-Montin-Greer	Rilling Corp.	221 Petroleum Center Bla	da - Farminaton New Mor	
Name of Authorized Transporter of C		Address (Give address to which appro-	ved copy of this form is to be sent)	
None				
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	en	
give location of tanks.	I 8 26N 1E	No		
	with that from any other lease or pool,	give commingling order number:		
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v.   Diff. Res'v.	
Designate Type of Complet	cion = (X)	New Well Workover Deepen	Frug Back Same New V. Estit. New 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	
		CEMENTING RECORD	T 2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
The state of the s	TOD ALL OWARY TO (T)			
V. TEST DATA AND REQUEST OIL WELL	FOR ALLOWABLE (Test must be a able for this de	fter recovery of total volume of load oil epth or be for full 24 hours)	and must be equal to record in allow-	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	ft, etc.)	
			/ REDELY CO.	
Length of Test	Tubing Pressure	Casing Pressure	Choke Siz SEP 28 1967	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF OIL CON. COM.	
		<u> </u>	DIST. 3	
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
Actual Flod: 165t-16617B	Bengin of Feet	Barat Condensate, Niviol	dravity or condensate	
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size	
(1)				
I. CERTIFICATE OF COMPLIA	NCE	OIL CONSERVA	ATION COMMISSION	
. CERTIFICATE OF COMPLIA	NCC	JIL CONSERVA	TION COMMISSION	
I hereby certify that the rules are	ereby certify that the rules and regulations of the Oil Conservation APPROVED SEP 28 1967		<b>8 1967</b> , 19	
		ByOriginal Signed by Emery C. Arnold		
above is true and complete to t	ne best of my knowledge and belief.			
	TITLE SUPERVISOR DIST. 75		R DIST. #9	
		This form is to be filed in compliance with RULE 1104.		
Mark 1/1 Struke		If this is a request for allowable for a newly drilled or deepened		
- Juny Tsi	(Signature)		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.	
Vice Pres	1dent			
(Title)		All sections of this form must be filled out completely for allowable on new and recompleted wells.		

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.