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U.S.G.S.
LAND OFFICE
TRANSPORTER OIL
GAS
OPERATOR
PRORATION OFFICE

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

3160/121
3012/122

Operator	BENSON-MONTIN-GREER DRILLING CORP.		
Address	221 PETROLEUM CENTER BUILDING, FARMINGTON, NEW MEXICO 87401		
Reason(s) for filing (Check proper box)	Other (Please explain)		RECEIVED APR 19 1985
New Well <input checked="" type="checkbox"/>	Change in Transporter of:		
Recompletion <input type="checkbox"/>	Oil <input 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

OIL CON. DIV.
DIST. 3

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
CANADA OJITOS UNIT	21	Puerto Chiquito Mancos West	State, Federal or Fee Federal	NM 13947
Location				
Unit Letter	G	1800 Feet From The north Line and 1675 Feet From The east		
Line of Section	32	Township 26N Range 1W	NMPM, Rio Arriba	County

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)					
CINIZA PIPE LINE, INC.	P.O. Box 1887, Bloomfield, New Mexico 87413					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
None						
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	G	32	26N	1W	No	

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
5-9-82	9-27-84		8040'		7410'			
Elevations (DF, RKB, RT, GR, etc.,)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
7560' GR	Niobrara		7147'		7048'			
Perforations	Depth Casing Shoe							
7365-7390, 7320-7340, 7204-7212, 7188-7196, 7147-7157	7059'							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
26"	20"	33'	30 sacks
9-7/8"	7-5/8"	7059'	600 sacks
14-3/4"	10-3/4"	533'	440
	5-1/2" (liner)	6793 - 8038'	165

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)

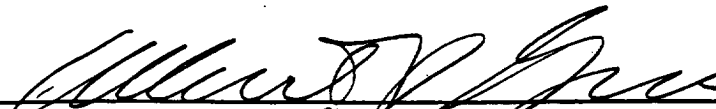
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
9/27/84	9/28/84	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hours	None	30#	None
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
	15	None	29

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.


(Signature)
President
(Title)
November 21, 1984
(Date)

OIL CONSERVATION COMMISSION

APPROVED APR 19 1985
BY Original Signed by FRANK T. CHAVEZ
TITLE SUPERVISOR DISTRICT 3

This form is to be filed in compliance with RULE 1-04.
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 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 multiply completed wells.