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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

RECEIVED  
JUN 24 1983  
OIL CON. DIV.  
DIST. 3

Operator Benson-Montin-Greer Drilling Corp.	
Address 221 Petroleum Center Building, Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	
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

II. DESCRIPTION OF WELL AND LEASE

Lease Name East Puerto Chiquito Mancos Unit	Well No. #38	Pool Name, Including Formation <del>Puerto Chiquito Mancos, East</del> Greenhorn	Kind of Lease State, Federal or Fee Federal	Lease No. NM-19803
Location				
Unit Letter H	1980	Feet From The North	Line and 660	Feet From The East
Line of Section 8	Township 26N	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"/> Ciniza Pipe Line, Inc.	Address (Give address to which approved copy of this form is to be sent) Box 1887, Bloomfield, New Mexico
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)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? 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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 4/22/83	Date Compl. Ready to Prod. 5/29/83	Total Depth 3081'	P.B.T.D. 3074'					
Elevations (DF, RKB, RT, GR, etc.) 7051' GR	Name of Producing Formation Greenhorn	Top Oil/Gas Pay 3040'	Tubing Depth 3044'					
Perforations None	Open Hole 3061'-3074'	Depth Casing Shoe						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
13-3/8"	9-5/8"	161'	140 cubic feet					
8-3/4"	7"	2050'	280 cubic feet					
6-1/4"	4-1/2"	3061'	155 cubic feet					
	2-3/8"	3044'						

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)

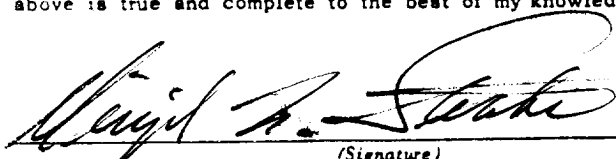
Date First New Oil Run To Tanks 5/30/83	Date of Test 5/30/83 to 5/31/83	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure	Casing Pressure 20#	Choke Size None
Actual Prod. During Test 42 bbls	Oil - Bbls. 42	Water - Bbls. 0	Gas - MCF 42,000

GAS WELL

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

VI. CERTIFICATE OF COMPLIANCE

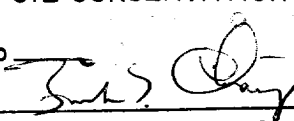
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

  
(Signature)

Vice-President  
(Title)

June 23, 1983  
(Date)

OIL CONSERVATION COMMISSION

8-8-83  
APPROVED  
BY   
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 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.