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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
7. Unit Agreement Name
8. Farm or Lease Name
State 36-22-6
9. Well No.
#1
10. Field and Pool, or Wildcat
Rusty Chacra
12. County
Sandoval

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator
Benson Mineral Group, Inc.
3. Address of Operator
555 17th St., Suite 3200, Denver, Colorado 80202
4. Location of Well
UNIT LETTER M, 810 FEET FROM THE South LINE AND 800 FEET FROM THE West LINE, SECTION 36 TOWNSHIP 22N RANGE 6W NMPM.
15. Elevation (Show whether DF, RT, GR, etc.)
7010 GR.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER Run tbq <input checked="" type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

4-21-79: Blow well to clean up.
4-24-79: Ran 2 3/8" tbq, land at 1856' GR.
4-25-79 Thru 5-4-79: Blow well daily to clean up, heavy mist and spray water.
6-8-79: Haul rods to location. Wait on pulling unit and roustabout crew to set pmp equipment so well can be pmp tested.

OCD 1
12720



18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED <u>Paul C. Ellison</u>	TITLE <u>Production Manager</u>	DATE <u>June 14, 1979</u>
Original Signed by <u>A. R. Kendrick</u>	TITLE <u>SUPERVISOR DISTRICT # 3</u>	DATE <u>JUN 18 1979</u>
APPROVED BY		S. GEOLOG

CONDITIONS OF APPROVAL, IF ANY:

✓

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NEW MEXICO OIL CONSERVATION COMMISSION

30-043-20386
Form C-101
Revised 1-1-65

5A. Indicate Type of Lease	
STATE <input checked="" type="checkbox"/>	FEE <input type="checkbox"/>
5. State Oil & Gas Lease No.	
St. NM-L-1561	

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		8. Farm or Lease Name	
DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>		State 36-22-6	
2. Name of Operator		9. Well No.	
Benson Mineral Group, Inc.		1	
3. Address of Operator		10. Field and Pool, or Wildcat	
3200 Anaconda Tower, 555 17th St., Denver, CO 80202		Wildcat <i>Chacra</i>	
4. Location of Well		12. County	
UNIT LETTER <u>M</u> LOCATED <u>810</u> FEET FROM THE <u>South</u> LINE		Sandoval	
AND <u>800</u> FEET FROM THE <u>West</u> LINE OF SEC. <u>36</u> TWP. <u>22N</u> RGE. <u>6W</u> NMPM			
19. Proposed Depth		19A. Formation	
2000		Chacra	
20. Rotary or C.T.		Rotary	
21. Elevations (Show whether DF, RT, etc.)		22. Approx. Date Work will start	
7010 GR		As soon as permitted	
21A. Kind & Status of Reg. Bond		21B. Drilling Contractor	
State-wide		B & N Drilling	

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
9-5/8	7" used	23	100	50 sx. circ.	
6 1/2	4 1/2" new	9.5	2000	210 sx. circ.	

Benson Mineral Group, Inc. intends to drill the above well to evaluate the Chacra formation. A blowout preventer diagram is attached.
The gas is not dedicated.

APPROVAL VALID
FOR 90 DAYS UNLESS
DRILLING COMMENCED,

EXPIRES 12-12-78

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM; IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

Signed Paul C. Ellison Title Production Manager Date 9-8-78
(This space for State Use)

APPROVED BY Frank S. Chang TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form O-102
Supersedes O-101
Effective 1-1-77

All distances must be from the outer boundaries of the Section.

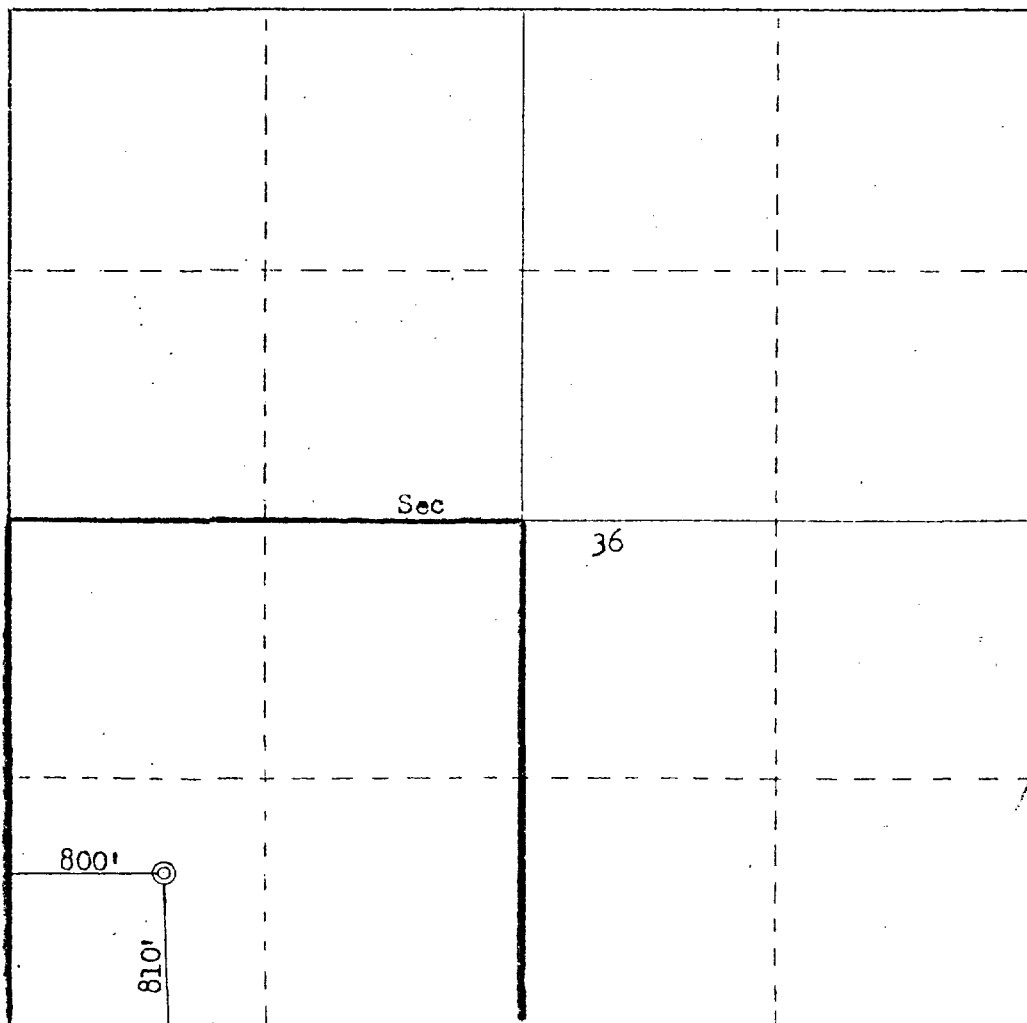
Operator BENSON MINERAL GROUP, INC.		Section STATE 36-22-6		Well No. 1
Map Letter M	Section 36	Township 22N	Range 6W	County SANDOVAL
Actual Postage Location of Well:				
810	feet from the South	800	feet from the West	Line
Ground Level Elev. 7010	Producing Formation Chacra	Well Name Wildcat	Dedicated Acreage 160	

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Paul C. Ellison

Name

Paul C. Ellison

Position

Production Manager

Company

Benson Mineral Group, Inc.

Date

September 8, 1978

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

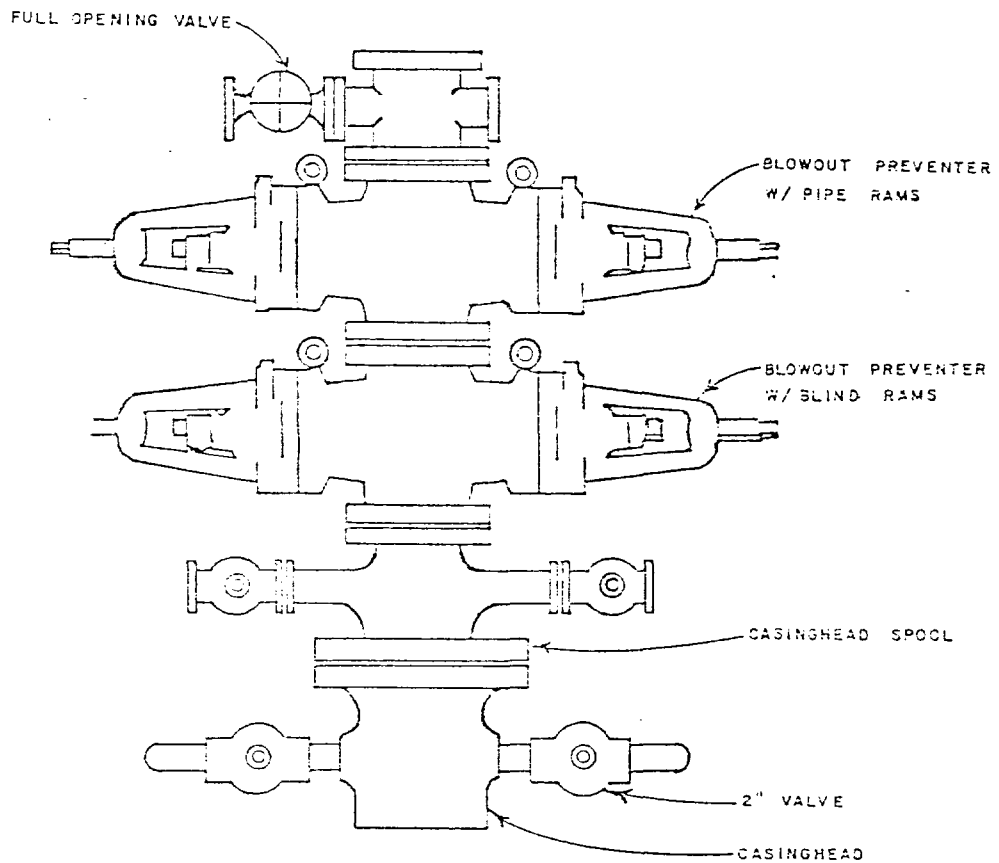
Date Surveyed

September 14, 1978

Registered Professional Surveyor
and of the State of New Mexico

Fred B. Kerr, Jr.

Certificate No. **3950**



**BENSON
MINERAL
GROUP, INC.**

3200 Anaconda Tower
555 17th Street
Denver, Colorado 80202

STANDARD BLOWOUT PREVENTER
ASSEMBLY
6" 900 SERIES

DESIGNED BY	A. E.	POSTED	APPROVED BY	DRAFT NO. 17
				G. W. R.

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OPERATOR	4

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
St. NM-L-1561	

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		7. Unit Agreement Name	
2. Name of Operator Benson Mineral Group, Inc.		8. Farm or Lease Name State 36-22-6	
3. Address of Operator 3200 Anaconda Tower, 555 17th Street, Denver, CO 80202		9. Well No. 1	
4. Location of Well UNIT LETTER M 810 FEET FROM THE South LINE AND 800 FEET FROM THE West LINE, SECTION 36 TOWNSHIP 22N RANGE 6W NMPM.		10. Field and Pool, or Wildcat Rusty Chacra	
15. Elevation (Show whether DF, RT, GR, etc.) 7010 GR		12. County Sandoval	

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

10-7-78: Spud.
10-8-78: 7" Surface casing set at 97' GR with 50 sacks cement, circulate. Pressure test casing to 600 psi. OK.
10-10-78: TD 2000'.
10-11-78: Log. 4½" production casing set at 1983' with 240 sacks cement, circulate. Pressure test casing to 2500 psi. OK.



18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Paul C. Ellison TITLE Production Manager DATE October 20, 1978

Original Signed by A. R. Kendrick

APPROVED BY _____ TITLE SUPERVISOR DIST. #3 DATE OCT 23 1978

CONDITIONS OF APPROVAL, IF ANY:

NEW MEXICO OIL CONSERVATION COMMISSION
MULTIPOINT AND ONE POINT BACK PRESSURE TEST FOR GAS WELL

Form C-122
 Revised 9-1-65

Type Test <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Annual <input type="checkbox"/> Special					Test Date 8-19-79	
Company Benson			Connection None			
Pool Chacra			Formation Chacra			Unit
Completion Date 8-19-79		Total Depth 2000'		Plug Back TD 1894'		Elevation 7010'
Casing Size 4 1/2"		WT. 9.5#		Set At 1983		Perforations: From 1795 To 1831
Tubing Size 2 3/8"		WT. 4.7#		Set At 1856'		Perforations: open-ended From To
Type Well - Single - Bradenhead - G.G. or G.O. Multiple Single					Packer Set At None	
Producing Thru casing		Reservoir Temp. °F 60		Mean Annual Temp. °F 60		Baro. Press. - P _a
L 1983		H .60		G _g	% CO ₂	% N ₂
Prover		Meter Run		Taps		

FLOW DATA						TUBING DATA		CASING DATA		Duration of Flow	
NO.	Prover Line Size	X	Orifice Size	Press. p.s.i.g.	Diff. h _w	Temp. °F	Press. p.s.i.g.	Temp. °F	Press. p.s.i.g.		Temp. °F
1.	1 month					60	0	60	370	60	30 days
2.	2" x 1/2"			3.9			0		3.9		24 hrs.
3.							(pumping)				
4.											
5.											

RATE OF FLOW CALCULATIONS							
NO.	Coefficient (24 Hour)	$\sqrt{h_w P_m}$	Pressure P _m	Flow Temp. Factor F _t	Gravity Factor F _g	Super Compress. Factor, F _{pv}	Rate of Flow Q, Mcfd
1.			3.9	1.0	1.0	1.0	68
2.							
3.							
4.							
5.							

NO.	P _t	Temp. °R	T _t	Z	Gas Liquid Hydrocarbon Ratio _____ Mcf/bbl.
1.					A.P.I. Gravity of Liquid Hydrocarbons _____ Deg.
2.					Specific Gravity Separator Gas _____ X X X X X X X X
3.					Specific Gravity Flowing Fluid _____ X X X X X
4.					Critical Pressure _____ P.S.I.A. P.S.I.A.
5.					Critical Temperature _____ B R

NO.	P _t ²	P _w	P _w ²	P _t ² - P _w ²	(1) $\frac{P_t^2}{P_t^2 - P_w^2} = \frac{145924}{145671.19}$	(2) $\left[\frac{P_t^2}{P_t^2 - P_w^2} \right]^n = \frac{1.001}{1}$
1.	382	15.9	252.8	145671.19		
2.						
3.						
4.						
5.						

Absolute Open Flow _____ 68 _____ Mcfd @ 15.025			Angle of Slope θ _____		Slope, n _____ 85
Remarks: Well was pump tested					

Approved by Commission	Conducted by Kurt Nelson	Calculated by Sue Johnson	Checked by Paul C. Ellison
------------------------	-----------------------------	------------------------------	-------------------------------

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OPERATOR	1

NEW MEXICO OIL CONSERVATION COMMISSION

34, 102 and 103
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
St. NM-L-1561

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT --" (FORM C-101) FOR SUCH PROPOSALS.)

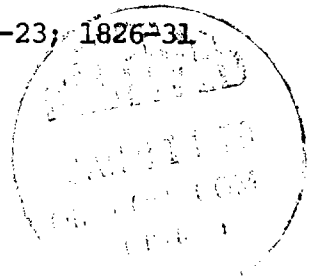
1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator Benson Mineral Group, Inc.
3. Address of Operator 3200 Anaconda Tower, 555 17th Street, Denver, CO 80202
4. Location of Well UNIT LETTER M, 810 FEET FROM THE South LINE AND 800 FEET FROM THE West LINE, SECTION 36 TOWNSHIP 22N RANGE 6W NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 7010 GR.

7. Unit Agreement Name
8. Farm or Lease Name State 36-22-6
9. Well No. 1
10. Field and Pool, or Wildcat Rusty Chacra
12. County Sandoval

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOBS <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Perforating

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 103.

11-15-78: Do dirt work, clean up site.
 11-21-78: Set ground ankers.
 11-28-78: Fence reserve pits.
 12-22-78: Backfill reserve pits.
 1-22-78: Repair road.
 1-24-78: Ran GRC log. PBTD 1894'. Perf 1795-1805'; 1811-23; 1826-31 with 2 shots per foot.



18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED <u>Paul C. Ellison</u>	TITLE <u>Production Manager</u>	DATE <u>January 26, 1979</u>
Original Signed by A. R. Kendrick		DATE <u>JAN 31 1979</u>
APPROVED BY _____	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		

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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
ST. NM-L-1561	

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT - I" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		7. Unit Agreement Name	
2. Name of Operator		8. Farm or Lease Name	
Benson Mineral Group, Inc.		State 36-22-6	
3. Address of Operator		9. Well No.	
555 17th St. 3200 Anaconda Tower, Denver, CO 80202		1	
4. Location of Well		10. Field and Pool, or Wildcat	
UNIT LETTER M, 810 FEET FROM THE South LINE AND 800 FEET FROM THE West LINE, SECTION 36 TOWNSHIP 22N RANGE 6W NMPM.		Rusty Chacra	
15. Elevation (Show whether DF, RT, GR, etc.)		12. County	
		Sandoval	

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:

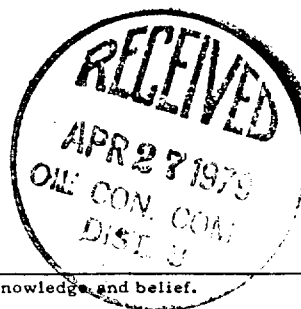
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <u>Fracturing</u> <input checked="" type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.

3-23-79: Set frac tank.
4-13-79: Haul 1900' 2 3/8" tubing to location.
4-17-79: Foam frac with 30,000# sand and 15,000 gal. foam.
4-19-79: SI waiting to run tubing.



RECEIVED
APR 26 1979
U. S. GEOLOGICAL SURVEY
DENVER, COLO.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Paul C. Ellison TITLE Production Manager DATE April 24, 1979

Original Signed by A. R. Kendrick

APPROVED BY _____ TITLE SUPERVISOR DIST. 3 DATE APR 27 1979

CONDITIONS OF APPROVAL, IF ANY:

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LAND OFFICE	1
OPERATOR	1

**NEW MEXICO OIL CONSERVATION COMMISSION
WELL COMPLETION OR RECOMPLETION REPORT AND LOG**

Form C-105
Revised 11-1-74

5a. Indicate Type of Lease
State ☒ Fee ☐

5. State Oil & Gas Lease No.
St. NM-L-1561

1a. TYPE OF WELL
OIL WELL ☐ GAS WELL ☒ DRY ☐ OTHER _____

b. TYPE OF COMPLETION
NEW WELL ☒ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ OTHER _____

7. Unit Agreement Name

8. Farm or Lease Name
State 36-22-6

2. Name of Operator

9. Well No.
1

3. Address of Operator
Benson Mineral Group, Inc.

10. Field and Pool, or Wildcat
Chacra

4. Location of Well
3200 Anaconda Tower, 555 17th St., Denver, CO 80202

UNIT LETTER M LOCATED 810 FEET FROM THE South LINE AND 800 FEET FROM

12. County
Sandoval

THE West LINE OF SEC. 36 TWP. 22N RGE. 6W NMPM

15. Date Spudded 10-7-78	16. Date T.D. Reached 10-10-78	17. Date Compl. (Ready to Prod.) 8-19-79	18. Elevations (DF, RAB, RT, GR, etc.) 7010 GR	19. Elev. Casinghead
-----------------------------	-----------------------------------	---	---	----------------------

20. Total Depth 2000'	21. Plug Back T.D. 1894'	22. If Multiple Compl., How Many Single	23. Intervals Drilled By Surf-TD	Rotary Tools	Cable Tools
--------------------------	-----------------------------	--	-------------------------------------	--------------	-------------

24. Producing Interval(s), of this completion - Top, Bottom, Name 1795-1831 Chacra	25. Was Directional Survey Made NO
---	---------------------------------------

26. Type Electric and Other Logs Run IES, FDC	27. Was Well Cored NO
--	--------------------------

28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
7"	20#	97'	9 7/8"	50 sx cmt	
4 1/2"	9.5#	1983'	6 1/4"	240 sx cmt	

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET
None					2 3/8"	1856'	None

31. Perforation Record (Interval, size and number) 1795-1805; 1811-1823'; 1826-1831' x 2 SPF	32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
	DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
	1795-1831	15,000 gal 70 quality foam
		30,000# 10-20 sand

33. PRODUCTION							
Date First Production SI		Production Method (Flowing, gas lift, pumping - Size and type pump) Pumping				Well Status (Prod. or Shut-in) SI	
Date of Test 8-19-79	Hours Tested 24	Choke Size 1/2"	Prod'n. For Test Period →	Oil - Bbl. 0	Gas - MCF 68	Water - Bbl. 34	Gas - Oil Ratio --
Flow Tubing Press. Pumping	Casing Pressure 3.9 psig	Calculated 24-Hour Rate →	Oil - Bbl. --	Gas - MCF 68	Water - Bbl. 34	Oil Gravity - API (Corr.) --	

4. Disposition of Gas (Sold, used for fuel, vented, etc.) To be sold	Test Witnessed By M. L. Ellsaesser
---	---------------------------------------

5. List of Attachments

6. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.

SIGNED Paul C. Ellison TITLE Production Manager DATE Oct. 5, 1979

NO. OF COPIES RECEIVED	5
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SANTA FE	1
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OPERATOR	3

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
St.-NM-L-1561	

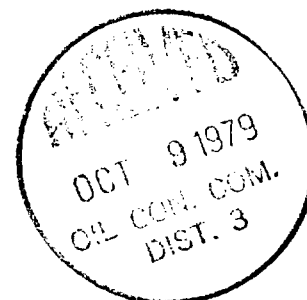
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(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)	
1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER-	7. Unit Agreement Name
2. Name of Operator Benson Mineral Group, Inc.	8. Farm or Lease Name State 36-22-6
3. Address of Operator 3200 Anaconda Tower, 555 17th St., Denver, CO 80202	9. Well No. 1
4. Location of Well UNIT LETTER M, 810 FEET FROM THE South LINE AND 800 FEET FROM THE West LINE, SECTION 36 TOWNSHIP 22N RANGE 6W NMPM.	10. Field and Pool, or Wildcat Rusty Chacra
15. Elevation (Show whether DF, RT, GR, etc.)	12. County Sandoval

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	Status Report <input checked="" type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

7-2-79: Ran 2 x 1 1/2" pmp and 5/8" rods.
7-21-79: Set pumping and made connections.
8-14-79: Pmp test well.
8-29-79: Pmp test well. Set up orifice well tester to meter gas. Waiting on charts from contract pumper.



18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED <u>Paul C. Ellison</u> Paul C. Ellison at Kendrick	TITLE <u>Production Manager</u>	DATE <u>Oct. 3, 1979</u>
APPROVED BY <u>Original signed by</u>	TITLE <u>SUPERVISOR DISTRICT # 3</u>	DATE <u>MAR 18 1980</u>
CONDITIONS OF APPROVAL, IF ANY:		

BENSON
MINERAL
GROUP, INC.

October 5, 1979

Mr. Joe D. Ramey, Director
Oil Conservation Commission
State of New Mexico
P.O. Box 2088
Santa Fe, NM 87501

Dear Mr. Ramey:

This letter is to inform you that the following wells are
capable of producing gas in commercial quantities:

M Federal 17-22-6 #1, Sandoval County, New Mexico
State 36-22-6 #1, Sandoval County, New Mexico *ACF 62 MCFPD*

Gas from the above wells is not dedicated.

Sincerely,

BENSON MINERAL GROUP, INC.



Paul C. Ellison
Production Manager

PCE/pms
cc: A. R. Kendrick



OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-10:
Revised 11

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3a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee
3. State Oil & Gas Lease No.	
St. NM-L-1561	

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name
2. Name of Operator Integrated Energy Inc.		8. Farm or Lease Name State 36-22-6
3. Address of Operator P. O. Box 61585, Houston, Texas 77208-9990		9. Well No. 1
4. Location of Well UNIT LETTER M 810 FEET FROM THE South LINE AND 800 FEET FROM THE West LINE, SECTION 36 TOWNSHIP 22N RANGE 6W NMPM.		10. Field and Pool, or Wildcat Chacra
15. Elevation (Show whether DF, RT, GR, etc.) 7010 GR		12. County Sandoval

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPERATIONS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Change of Operator	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any project) SEE RULE 1703.

Request permission to change operators name from Benson Mineral Group, Inc. to Integrated Energy Inc.

State 36-22-6#1 was completed 8-19-79 as a gas well and has been shut in pending a pipeline connection. To date, well is not connected to a pipeline.



8. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Claire Hays Meas TITLE Regulatory & Production Supv DATE 2/12/82

APPROVED BY _____ TITLE _____ DATE _____

ADDITIONAL APPROVAL IF ANY:

REPORT OF PROOF OF APPARENT DEVIATION

Integrated Energy
Benson Mineral Group, Inc.

Operator _____ Lease No. ST NM-L-1561

FIELD Chacra County, ST Sandoval, NM

Lease Name & Well No. State 36-22-6 #1 SEC. 36 T 22N R 6W

Degrees Deviation	Deviation Factor	DEGREES DEVIATION	DEPTH FROM SURFACE	LENGTH OF INTERVAL	DEVIATION FACTOR	DEVIATION OF INTERVAL	CUMULATIVE APPARENT DEVIATION	REMARKS
1/4	.00436							
1/4	.00873	1°	500	500	.01745	8.725	8.725	
3/4	.01309	3/4°	2000	1500	.01309	19.635	28.36	
1	.01745							
1 1/4	.02182							
1 1/4	.02618							
1 1/4	.03054							
2	.03490							
2 1/4	.03926							
2 1/4	.04362							
2 1/4	.04798							
3	.05234							
3 1/4	.05669							
3 1/4	.06105							
3 1/4	.06540							
4	.06976							
4 1/4	.07411							
4 1/4	.07846							
4 1/4	.08281							
5	.08716							
5 1/4	.09150							
5 1/4	.09585							
5 1/4	.10019							
6	.10453							
6 1/4	.10887							
6 1/4	.11320							
6 1/4	.11754							
7	.12187							
7 1/4	.12620							
7 1/4	.13053							
7 1/4	.13485							
8	.13917							
8 1/4	.14349							
8 1/4	.14781							
8 1/4	.15212							
9	.15643							
9 1/4	.16074							
9 1/4	.16505							
9 1/4	.16935							
10	.17365							



ATTEST:

F. Michael Murphy
F. Michael Murphy, Secretary

Title President

Date 8-19-79

Certified as Being True & Correct by _____

This form is to be filed with the appropriate District Office of the Commission not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, Items 16 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. (See Rule 1165).

Southeastern New Mexico

T. Anhy _____	T. Canyon _____
T. Salt _____	T. Strawn _____
B. Salt _____	T. Atoka _____
T. Yates _____	T. Miss _____
T. 7 Rivers _____	T. Devonian _____
T. Queen _____	T. Silurian _____
T. Grayburg _____	T. Montoya _____
T. San Andres _____	T. Simpson _____
T. Glorieta _____	T. McKee _____
T. Paddock _____	T. Ellenburger _____
T. Blinberry _____	T. Gr. Wash _____
T. Tubb _____	T. Granite _____
T. Drinkard _____	T. Delaware Sand _____
T. Abo _____	T. Bone Springs _____
T. Wolfcamp _____	T. _____
T. Penn. _____	T. _____
T. Cisco (Bough C) _____	T. _____

Northwestern New Mexico

T. Ojo Alamo _____	T. Penn. "B" _____
T. Kirtland-Fruitland _____	T. Penn. "C" _____
T. Pictured Cliffs _____	T. Penn. "D" _____
T. Chacra _____	
T. Cliff House _____	T. Leadville _____
T. Menefee _____	T. Madison _____
T. Point Lookout _____	T. Elbert _____
T. Mancos _____	T. McCracken _____
T. Gallup _____	T. Ignacio Qtzte _____
Base Greenhorn _____	T. Granite _____
T. Dakota _____	T. _____
T. Morrison _____	T. _____
T. Todilto _____	T. _____
T. Entrada _____	T. _____
T. Wingate _____	T. _____
T. Chinle _____	T. _____
T. Permian _____	T. _____
T. Penn. "A" _____	T. _____

No. 1, from.....to..... No. 4, from.....to.....
 No. 2, from.....to..... No. 5, from.....to.....
 No. 3, from.....to..... No. 6, from.....to.....

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from.....to.....feet.

No. 2, from.....to.....feet.

No. 3, from.....to.....feet.

No. 4, from.....to.....feet.

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES DESIRED		
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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		
Operator		
Integrated Energy Incorporated		
Address		
P.O. Box 61585, Houston, Texas 77208		
Reason(s) for filing (Check proper box)		Other (Please explain)
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 ownerBenson Minerals Group Inc

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease
State 36-22-6	1	WC Chacra	State, Federal or Fee State	St. NM L-1561
Location				
Unit Letter	M	810	Feet From The	South
Line and		800	Feet From The	
West				
Line of Section	36	Township	22N	Range
6W		, NMPM,		Sandoval
Cour				

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)	
DOMESTIC PETROLEUM	1625 Broadway Suite 2900 Denver Co 80202	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
		Is gas actually connected? when
		No

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 Res'v.	Diff. Re
		XX	XX					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
10/7/78	8/19/79		2000'		1894'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
7010 GR	Chacra		1795'		1856'			
Perforations					Depth Casing Shoe			
1795-1805;1811-23;1826-31 @ 2 SPF					1983'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
9 7/8"	7", 20#	97'	50
6 1/2"	4 1/2", 9.5#	1983'	240
	2 3/8" tubing	1856'	

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	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
68	24 hr.		
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
Pumping	NA	3.9 psig 370	1/2"

VI. 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.Terence J. Casey
(Signature)

Terence J. Casey, Executive Vice President

(Title)

20 April 1982

(Date)

OIL CONSERVATION DIVISION

APPROVED APR 26 1982, 19BY Frank J. CaseyTITLE 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 allow-
able on new and recompleted wells.Fill out only Sections I, II, III, and VI for changes of own-
er, well name or number, or transporter, or other such change of condition.Separate Form C-104 must be filled for each pool in multiple
completed wells.

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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	GAS
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PRODUCTION OFFICE	

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

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED
MAR 14 1985
OIL CONSERVATION DIV.
DIST. 3

I. Operator MCO RESOURCES (INTEGRATED) CORP.

Address 5718 WESTHEIMER, SUITE 1100, HOUSTON, TX 77057

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input checked="" type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

Other (Please explain) CHANGE OPERATOR NAME

If change of ownership give name and address of previous owner INTEGRATED ENERGY, INC., P. O. BOX 61585, HOUSTON, TX 77208

II. DESCRIPTION OF WELL AND LEASE

Lessee Name <u>STATE 36-22-6</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Brushy CHACRA</u>	Kind of Lease State, Federal or Fee <u>STATE</u>	Lease No. <u>ST. NM L-1561</u>
Location				
Unit Letter <u>M</u>	<u>810</u>	Feet From The <u>South</u> Line and	<u>800</u>	Feet From The <u>West</u>
Line of Section <u>36</u>	Township <u>22N</u>	Range <u>6W</u>	<u>NMPM</u>	<u>SANDOVAL</u> 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)
<u>TEXACO OIL INC.</u>	<u>P. O. BOX EE, CORTEZ, CO. 81321</u>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.
	Is gas actually connected? <u>yes</u> When <u>10/82</u>

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Jane Ashcraft
(Signature)

JANE ASHCRAFT
(Title)

MARCH 7, 1985
(Date)

OIL CONSERVATION DIVISION

APPROVED Frank J. [Signature] MAR 14 1985

BY [Signature]
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.

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
PITCO Production Company

Address
1790 One Williams Center, Tulsa, Oklahoma 74172

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

Other (Please explain)

If change of ownership give name and address of previous owner MCO Resources (Integrated) Corp., formerly Integrated Energy, Inc., MCO Plaza, 5718 Westheimer, Houston, Texas 77057.

II. DESCRIPTION OF WELL AND LEASE

Lease Name State 36-22-6	Well No. 1	Pool Name, including Formation Rusty Chacra	Kind of Lease State, Federal or Fee State	Lease No. NM I-1561
Location Unit Letter <u>M</u> : <u>810</u> Feet From The <u>South</u> Line and <u>800</u> Feet From The <u>West</u>				
Line of Section <u>36</u> Township <u>22N</u> Range <u>6W</u> , NMPM, <u>Sandoval</u> 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)
Texaco Oils Inc.	P. O. Box 52332, Houston, Texas 77052
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	Yes 10/82

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Rick Couch
Rick Couch (Signature)
Landman
(Title)
March 25, 1986
(Date)

OIL CONSERVATION DIVISION

APPROVED MAR 28 1986
BY Frank J. [Signature]
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 V 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.

MAR 28 1986
OIL CON. DIV.
DIST. 3