

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
TRANSPORTER	OIL
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OIL CONSERVATION DIVISION

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

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APR 18 1989

OIL CONSERVATION DIV.
SANTA FE

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Devcon Operations Company, Inc., and Olsen Energy Associates Co-Operators	
Address 1801 Broadway, Suite 600, Denver, Colorado 80202 - 3834	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate N/A

If change of ownership give name and address of previous owner Evans Production Company, P.O. Box 21399, Albuquerque, N.M. 87154-1399

II. DESCRIPTION OF WELL AND LEASE

Lease Name Bullseye	Well No. A-2	Pool Name, including Formation Marcelina/Dakota GAL.	Kind of Lease State, Federal or Fee FEE	Lease No. N/A
Location Unit Letter P ; 990' Feet From The South Line and 990' Feet From The East Line of Section 13 Township 16 North Range 10 West , NMPM, McKinley 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"/> Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1103, Houston, Texas 77001	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> none	Address (Give address to which approved copy of this form is to be sent) N/A	
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 13
	Twp. 16N	Rge. 10W
Is gas actually connected?	When	N/A

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

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.

Eric Olsen
(Signature)
President
(Title)

(Date)

OIL CONSERVATION DIVISION

APPROVED APR 19 1989, 19
BY Original Signed by FRANK T. CHAVEZ
TITLE SUPERVISOR DISTRICT # 9

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.