

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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| PRODUCTION OFFICE | |

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

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APR 18 1989

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

OIL CONSERVATION DIV.
SANTA FE

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OIL CON. DIV.

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

| | |
|---|--|
| I. Operator | |
| Devcon Operations Company, Inc. & 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 | Well No. | Pool Name, including Formation | Kind of Lease | Lease No. |
| Bullseye | 2 | Marcelina/Dakota | State, Federal or Fee FEE | N/A |
| Location | | | | |
| Unit Letter <u>N</u> : <u>540'</u> Feet From The <u>South</u> Line and <u>1560</u> Feet From The <u>West</u> | | | | |
| Line of Section <u>18</u> Township <u>16 North</u> Range <u>9 West</u> , NMPM, <u>McKinley</u> 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"/> | Address (Give address to which approved copy of this form is to be sent) | |
| Permian Corporation | P.O. Box 1103, Houston, Texas 77001 | |
| 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 | N/A | |
| If well produces oil or liquids, give location of tanks. | Unit | Sec. |
| | N | 18 |
| | Twp. | Rge. |
| | 16N | 9W |
| Is gas actually connected? | When | |
| no | 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 #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.