Submit 5 Copies
Appropriate District Office
DISTRICT I DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Furm C-104 Revised 1-1-89
See Instructions
at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 37410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operation Well API No. Bonneville Fuels Corporation 3004506355 Address 1600 Broadway, Suite 1110, Denver CO 80202 Reason(s) for Filing (Check proper box) Other (Please explain) Change in Transporter of: Dry Gas Recompletion Change of Ownership Effective 8-1-89 Casinghead Gas Condensate Change in Operator Change of Operator Effective 3-8-90 If change of operator give name and address of previous operator Chevron U.S.A. Inc., successor by merger to Gulf Oil Corporation II. DESCRIPTION OF WELL AND LEASE Lease Name Pool Name, Including Formation Well No. Lease No. State, Federal or Fee E Scott Federal 5 W. Kutz Pictured Cliffs SF-078089 Location 1,650 1,650 Feet From The Feet From The _ Line and ___ Unit Letter 23 Township 27N 11W Range , NMPM, San Juan III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent) None Name of Authorized Transporter of Casinghead Gas or Dry Gas S Address (Give address to which approved copy of this form is to be sent) Gas Company of New Mexico Fidelity Union Tower Bldg., Dallas TX If well produces oil or liquids, Unit Twp. Rge. Is gas actually connected? When? give location of tanks. Yes <u>Unknown</u> If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well Gas Well New Well Workover | Deepen Plug Back Same Res v Diff Res v Designate Type of Completion - (X) Date Spudded Date Compl. Ready to Prod. Total Depth PRTD Elevations (DF, RKB, RT, GR, atc.) Top Oil/Gas Pay Name of Producing Formation Tubing Depth Perforations Depth Casing Shoe TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE SACKS CEMENT 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 Tank Producing Method (Flow, pump, gas lift, etc.) Date of Tex Choke Site. Length of Test Casing Pressure Tubing Pressure Actual Prod. During Test Oil - Bbls. Water - Bbis MAR1 5 19 GAS WELL ONActual Prod. Test - MCF/D Length of Test Bbis. Condensate/MMCF DIST. Testing Method (pilot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size VL OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION 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 betief. MAR 1 5 1940 Date Approved

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Greg Twombly

Due

Printed Name March 13, 1990

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordurce with Rule 111.

By_

Title

SUPERVISOR DISTRICT #3

2) All sections of this form must be filled out for allowable on new and recompleted wells.

President

Telephone No.

Tide (303) 863-1555

- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.