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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

Form 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., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Bonneville Fuels Corporation	Well API No. 3004506382
Address 1660 Lincoln Street, Ste 1800, Denver, CO 80264	
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Change in Transporter of: <input checked="" type="checkbox"/> Other (Please explain) Reclassification Gallegos Fruitland Formation Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name E. Scott Federal	Well No. 9	Pool Name, Including Formation Gallegos Fruitland Sand	Kind of Lease State (Federal) or Fee	Lease No. SF078089
Location Unit Letter E : 1850 Feet From The N Line and 790 Feet From The W Line Section 23 Township 27N Range 11W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Gary Williams Energy, Corp	Address (Give address to which approved copy of this form is to be sent) 370 17th Street, Ste 5300 Denver, CO 80202					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Gas Company of New Mexico	Address (Give address to which approved copy of this form is to be sent) P. O. Box 16400-MS2612, Albuquerque, NM 87125					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?
					Yes	Unknown

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 Res'v
Date Spudded 7/7/61	Date Compl. Ready to Prod. 1/18/88		Total Depth 6774'		P.B.T.D. 1851'			
Elevations (DF, RKB, RT, GR, etc.) 6337' GL	Name of Producing Formation Fruitland Sand		Top Oil/Gas Pay 1728'		Tubing Depth 1674'			
Perforations 1728-33' 2 jspf ; 1736-44' 2 jspf					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4	8 5/8	211	150
7 7/8	4 1/2	6761	450
	2 3/8	1674	

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)

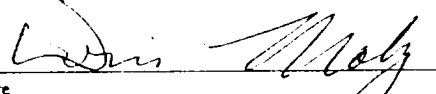
Date First New Oil Run To Tank NA	Date of Test 1/18/88	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D 215	Length of Test 2 hrs	Bbls. Condensate/MMCF 0	Gravity of Condensate na
Testing Method (pilot, back pr.) Flowing	Tubing Pressure (Shut-in) 25 FTP	Casing Pressure (Shut-in) 150 FCP	Choke Size 1/2"

VI. OPERATOR 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.

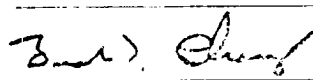
Signature 
Printed Name Doris Maly Engineering Technician
Date 12/10/92 Telephone No. (303) 863-1555

OIL CONSERVATION DIVISION

DEC 14 1992

Date Approved

By



SUPERVISOR DISTRICT #3

Title

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

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 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.