Submit 5 Copies
Appropriate District Office
DISTRICT 1
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 III 1000 Rio Brazos Rd., Aziec, NM 87410

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

•	TO	TRANS	PORT O	LAND NA	TURAL GA	<u>us</u>	61.31-			
Decision Bonneville Fuels Corporation					Well API No. 3004506689					
1600 Broadway, Sui	te 1110,	Denver	CO 8020	02						
Reason(s) for Filing (Check proper box) New Well Recompletion Change in Operator	Oil	hange in Trai	Gas 🗵	Chang		ership l	Effective ffective			
change of operator give name	Ghanne			cossor b			f Oil Cor			
and address of previous operator	ANDIFAS	F		-						
Fullerton Federal						Kind o State,	(Lease federa) or Fee		35c No. 078094	
Unit LetterE	_ : 1,65	0 Fee	st From The _	N Lin	e and	0 Fee	et From The	W	Line	
Section 11 Towns	hip 27N	Ra	nge 11	М , М	мрм,		San	Juan	County	
II. DESIGNATION OF TRA	NSPORTER	OF OIL	AND NAT	URAL GAS						
Name of Authorized Transporter of Oil None		r Condensate		Address (Gi			copy of this form			
arms of Authorized Transporter of Casinghead Gas or Dry Gas Gas Company of New Mexico				Box 1	Address (Give address to which approved copy of this form is to be sent) Box 1899, Bloomfield NM 87413					
If well produces oil or liquids, ive location of tanks.	i	ioc. Tu	<u> </u>		Yes	When U	nknown			
this production is commingled with the V. COMPLETION DATA	at from any other	lease or poo	l, give commit	ngling order num	ber:					
Designate Type of Completio	n - (X)	Oil Well	Gas Well	New Well	Workover	Deepea	Plug Back S	ame Resiv	Diff Res'v	
Date Spudded	Date Compl. Ready to Prod.			Total Depth	Total Depth P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation				Top Oil/Gas	Top Oil/Gas Pay Tubing Depth					
Perforations							Depth Casing	Shoe		
	D CEMENT	CEMENTING RECORD								
HOLE SIZE	ING & TUB	NG SIZE		DEPTH SET			SACKS CEMENT			
V. TEST DATA AND REQU	EST FOR A	LLOWAE	LE			louable for th	is death or he fo	e full 24 ka	wes.)	
OIL WELL (Test must be after recovery of total volume of load oil and must Date First New Oil Run To Tank Date of Test					be equal to or exceed top allowable for this depth or be for full 24 hours.) Producing Method (Flow, pump, gas lift, etc.)					
Length of Test	Tubing Pres	Tubing Pressure			Casing Pressure			E I W	EM	
Actual Prod. During Test	Oil - Bbis.	Oil - Bbla.			Water - Bbla.			MAR1 5 1990		
GAS WELL							OII CO		NV.	
Actual Prod. Test - MCF/D	Length of	est		Bbis. Cond	Bbis. Condensate/MMCF			DIST. 3		
Testing Method (pilot, back pr.)	Tubing Pre	saure (Shut-u)	Casing Pre	Casing Pressure (Shut-in) Choke Size					
VI. OPERATOR CERTIF						NSERV	ATION [DIVISI	ON	
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.				Do	Date ApprovedMAR 1 5 1990					
Mues -	L	11.				~	s d			
Signature Gree Twombly		Presi	dent	By	•	SUPER	RVISOR DI	STRICT	#3	
Printed Name 3/13/90	(303) 86		- Titl	e					

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.

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