

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

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

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico  
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator J.K. EDWARDS ASSOCIATES, INC.		Well API No. 30-045-28927
Address 1331 - 17TH STREET, SUITE 710, DENVER, COLORADO 80202		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
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 FEDERAL 8 FC	Well No. 8-1	Pool Name, including Formation BASIN (FRUITLAND COAL)	Kind of Lease State, Federal or Fee	Lease No. NM-0498
Location Unit Letter NW NE B : 1080 Feet From The NORTH Line and 1490 Feet From The EAST Line Section 8 Township 30N Range 12W , 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 type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
EL PASO NATURAL GAS COMPANY	P.O. BOX 1492, EL PASO, TX 79978					
If well produces oil or liquids, give location of tanks. N/A	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?
					NO	

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
		X	X					
Date Spudded 12/31/92	Date Compl. Ready to Prod. 2-4-93		Total Depth 2150'		P.B.T.D. 2106' MD			
Elevations (DF, RKB, RT, GR, etc.) 5832' RKB 5816'	Name of Producing Formation BASAL (FRUITLAND COAL)		Top Oil/Gas Pay 2038'		Tubing Depth 1845'			
Perforations 2028' - 2056.5' ELM					Depth Casing Shoe 2148'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		310.25'		250 SX "B"			
7 7/8"	4 1/2"		2,148'		390 SX + 100 SX			
	2 3/8"		1,845'					

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.)

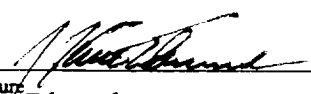
Date First New Oil Run To Tank	Date of Test 02/10/93	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size 2 5/8"
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF OIL CON. DIV. DIST. 3

GAS WELL WELL ST, PENDING INSTALLATION OF PRODUCTION FACILITIES & PIPELINE. NEED TO TURN  
WELL DOWN THE PIPELINE TO TEST (WHEN READY).

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in) 405	Casing Pressure (Shut-in) 420	Choke Size

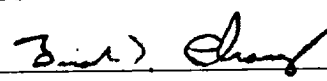
VI. OPERATOR CERTIFICATE OF COMPLIANCE

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   
J.K. Edwards President  
Printed Name Title  
Date 2/22/93 (303) 298-1400  
Telephone No.

OIL CONSERVATION DIVISION

Date Approved FEB 25 1993

By   
SUPERVISOR DISTRICT #3  
Title

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

- Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- All sections of this form must be filled out for allowable on new and recompleted wells.
- Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- Separate Form C-104 must be filed for each pool in multiply completed wells.