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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

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 OIL CONSERVATION DIVISION P.O. Box 2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator	<del></del>				1	Well API No.	<del></del>			
BANNON ENERGY, INC.						30-039-23598				
Address 2024 T. W. 1060				m 770/0						
3934 F.M. 1960 Reason(s) for Filing (Check proper box		1te 240	J, Houston		<del></del>					
New Well	•)	Change in	Transporter of:	X Other (Please	explain)					
Recompletion	completion Oil Dry Gas Char						nge in owner			
Change in Operator	Condensate	All changes effective date January I, 1989								
If change of operator give name and address of previous operator	ack A. Co	ole. P		91, Farmington,		199				
II. DESCRIPTION OF WELL				, <u> </u>						
Lease Name	ase Name			iding Formation		Kind of Lease No.				
Marcus Location		1	Counselo	r Gallup-Dakota		State, Federal or Fee SF078362				
Unit LetterA	: 8001	: 800' Feet From The North Line and 960' Feet From The East Lin								
Section 7 Town	Section 7 Township 23N Range			, NMPM, Ri	o Arril	a	County			
III. DESIGNATION OF TRA	NSPORTE									
Name of Authorized Transporter of Oil Giant Refining C		or Conder	nsate	Address (Give address t	o which appr	roved copy of this form	is to be sent)			
			an Des Cos	P. O. Box 91						
Name of Authorized Transporter of Casinghead Gas X or Dry Ga Gas Company of New Mexico				Address (Give address to which approved copy of this form is to be sent) P.O. Box 26400, Albuquerque NM 87125			is to be sent) 87125			
If well produces oil or liquids,	Unit	Sec.	Twp. Rge			When ?	The state of the s			
give location of tanks.	i a	7	23N 6W	Yes		August 15,	1985			
If this production is commingled with th IV. COMPLETION DATA	at from any oth	er lease or	pool, give commin	gling order number:						
		Oil Well	Gas Well	New Well Workove	r Deep	en Plug Back Sa	me Res'v Diff Res'v			
Designate Type of Completic	n - (X)	<u>i</u>	i	1	.   Docp	i lug back jsa	ine Kes V   Dill Kes V			
Date Spudded	Date Comp	ol. Ready to	Prod.	Total Depth		P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	oducing Formation		Top Oil/Gas Pay		Tubing Depth					
Perforations										
						Depth Casing S	hoe			
	т	TIRING	CASING AND	CEMENTING REC	OPD					
HOLE SIZE		IBING SIZE		DEPTH SET		SACKS CEMENT				
				DET ITT DE T		SAC	SAOKS CEMENT			
V TECT DATE AND DECLE	DOM DOD 4	** ***								
V. TEST DATA AND REQUIDED TO THE STREET OF T										
Date First New Oil Run To Tank	Date of Tes		of load oil and mu	st be equal to or exceed top Producing Method (Flow			iull 24 hours.)			
	Date of 16st				rosassing risasses (1 tow, purp, 822 tyt, etc.)					
Length of Test	Tubing Pre	ssure		Casing Pressure		Choke Size				
Actual Prod. During Test	Oil - Bbls.			Water - Bbis.	Water - Bbis.		Gas- MCF			
GAS WELL	L			1						
Actual Prod. Test - MCF/D	Length of	l'est		Bbls. Condensate/MMCF		Gravity of Cond	lensate			
Testing Method (pitot, back pr.)	Tubing Pre	ssure (Shut-	in)	Casing Pressure (Shut-in)		Choke Size	Choke Size			
VL OPERATOR CERTIFIC	CATE OF	COMP	LIANCE							
I hereby certify that the rules and regulations of the Oil Conservation				OIL CC	DNSEF	<b>IVATION DI</b>	VISION			
Division have been complied with an	d that the infor	mation give	n above							
is true and complete to the best of m	y knowledge an	d belief.		Date Approx	ved					
					- <del> </del>					
Signature				Bv						
W. J. Holcomb, Operating	Agent for	Bannon	Energy, Inc.	.   -,						
Printed Name			Title	Title			10.11.20E W C			
March 7, 1989  Date	(50	)5) 326-0 Teler	ohone No.							

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.