Submit 5 Copies
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 Santa Fe, New Mexico 87504-2088 DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator Well API No. Bannon Energy, Inc 30-039-24056 3934 1960 West, Suite 240, Houston TX 77068 F.M. Reason(s) for Filing (Check proper box) Other (Please explain) New Well Change in Transporter of: Recompletion Dry Gas Oil Change in Operator Casinghead Gas Condensate If change of operator give name and address of previous operator II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Kind of Lease Lease No. Marcus Lybrook Gallup State, Federal or Fee SF078362 Location 410 Unit Letter \_B North Line and 2150 Feet From The Feet From The Line NMPM, Rio Arriba 23N Section 12 7 W Township County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Address (Give address to which approved copy of this form is to be sent) or Condensate  $\boxtimes$ Giant Refining Co PO Box 9156, Phoenix AZ 85068 Name of Authorized Transporter of Casinghead Gas Address (Give address to which approved copy of this form is to be sent)
PO Box 191, Farmington NM 87499  $\sim$ or Dry Gas Cole Development ¢o. If well produces oil or liquids, Unit Sec. Twp Rge. Is gas actually connected? When? give location of tanks. 23N | В 12 7 W yes 10-21-86 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 P.B.T.D. Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Too Oil/Gas Pay Tubing Depth Perfocations Depth Casing Shoe TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE SACKS CEMENT 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 Producing Method (Flow, pump, gas lift, etc.) Length of Test **G** Sile Tubing Pressure Casing Pressure Actual Prod. During Test Oil - Bhic Water - Bbls. SEP 28 1989 **GAS WELL** I COM Actual Prod. Test - MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condebrate Testing Method (pitot, 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 **SEP 28 1989** is true and complete to the best of my knowledge and belief. Date Approved るシム) Ву\_ Signature W.J. Holcomb, Operating Agent for Bannon Energy SUPERVISOR DISTRICT #3 Printed Name Title <u>September 19, 1989</u> (505)326-0550 Telephone 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.
- 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 and There is other such changes.