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, Antesia, 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

Lo	i	UIHA	1112	70	HI OIL	AND NAT	UHAL G	AS				
Operator Popular Thomas The									Well API No. 30-039-24065			
Bannon Energy Inc.									30 037 24007			
3934 F.M. 1960 West, S	uite 24	40, Ho	ust	on	TX 77	068						
Reason(s) for Filing (Check proper box)						Othe	t (Please expl	ain)				
New Well	Contago in Transporter of											
Recompletion	Oil Dry Gas Casinghead Gas Condensate											
f change of operator give name	Camphead	Uas X	Con	cos	ite				·			
and address of previous operator							- 					
IL DESCRIPTION OF WELL A					·							
Lease Name	Well No. Pool Name, Including					-			Kind of Lease State Federal or Fee SF078362			
Marcus A	15 Lybrook Gall					.1up			SF0/8362			
Unit Letter D	. 800		F		n No	orth	. 880			West		
Om Louis	rea rion theine										Line	
Section 1 Township 23N Range 7W , NMPM, Rio Arriba County												
III. DESIGNATION OF TO ANS	ያ ውጥሮ፣	ያ ሰፑ ሳ	TT 4	יתא	יו זיידי גולא ג	DAT CAS				_		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL Name of Authorized Transporter of Oil or Condensate							Address (Give address to which approved copy of this form is to be sent)					
Giant Refining Co.	ant Refining Co.						PO Box 9156 Phoenix AZ 85068					
Name of Authorized Transporter of Casinghead Gas or Dry Gas						Address (Give address to which approved copy of this form is to be sent)					nt)	
Cole Development Co. If well produces oil or liquids,	Thit Car True P					PO Box 191 Farmingt			on NM 87499			
if well produces oil or liquids, give location of tanks.	[Unait] ID 1					Is gas actually connected?			Then ? 11-3-86			
If this production is commingled with that f			1		<u> </u>	13	xer:		 			
IV. COMPLETION DATA	-		• •									
Designate Type of Completion -	· (X)	Oil Well	ı [G	as Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded		l. Ready to	o Prov	1		Total Depth		1	PPTD		1	
	Date Compl. Ready to Prod.								P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth			
erforations									15	D 100 in 5		
4 VIVI BUVUB									Depth Casin	g 200c		
	CEMENTI	NG RECO	RD	1	 							
HOLE SIZE	CASING & TUBING SIZE					DEPTH SET				SACKS CEMENT		
· · · · · · · · · · · · · · · · · · ·									,			
	-					-			-			
· · · · · · · · · · · · · · · · · · ·												
V. TEST DATA AND REQUES	T FOR A	LLOW	ABI	E		1		· · · · · · · · · · · · · · · · · · ·	_ 			
OIL WELL (Test must be after re			of lo	ad o	il and must					for full 24 hou	rs.) .	
Date First New Oil Run To Tank	Date of Test					Producing Me	ethod (Flow, p	oump, gas lift.	DECENTA			
Length of Test	Tubing Pressure					Casing Pressure			Choke Size			
	-					_			CFD00			
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.	Water - Bbls.			Gas- Mel 2 3 1939			
	l								10H	and the second of the second o	- , ,	
GAS WELL Actual Prod. Test - MCF/D Length of Test						180°×						
THE PROPERTY OF THE PROPERTY O	Length of Test					Bbls. Condensate/MMCF			Gravity of Condensate			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)					Casing Pressure (Shut-in)			Choke Size			
						_	-				:	
VL OPERATOR CERTIFIC	ATE OF	COM	PLL	AN	CE			NOTE:	/A = : C : :			
I hereby certify that the rules and regulations of the Oil Conservation						OIL CONSERVATION DIVISION						
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.						CED 20 1000						
O(1/2)						Date ApprovedSEP 28 1989						
Wolfole						D		-	.40	\sim 1	,	
Signature W.J. Holcomb Operating Agent for Bannon Energ											<u>/</u>	
Printed Name Title						TitleSUPERVISOR DISTAICT #3						
<u>September 19, 1989</u> 505-326-0550						Inte						
Date		Tel	iepho	oc N	0.	11						

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 such partitle multiple or molecular wells.