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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

DISTRICT II P.O. Drawer DD, Antesia, NM \$8210

## OIL CONSERVATION DIVISION

1000 Rio	Brazos	Rd.,	Aztec,	NM	<b>274</b> 10
					-1-10

DISTRICT III		Sar	nta Fe,	New M	ox 2088 Iexico 875	04-2088						
1000 Rio Brazos Rd., Aztec, NM 87410	REOL											
I. Operator		TO TRA	NSPC	PT OI	REE AND NA	AUTHOR	IZATION					
Bannon Energy, Inc. c/o Holcomb Oil & Coo Inc.							Well	Well API No.				
							30-	30-039-24532				
P.O. Box 2058, Farmin Reason(s) for Filing (Check proper box)	igton, N	M 8749	99									
New Well		Change in 7	Transmort	a.f.	Ou	ner (Please exp	ain)			<del></del>		
Recompletion  Change in Operator	Oii		Dry Gas		Effect	ive 1-1-9	90					
I change of country since	Casinghea	d Gas XX	Conden	zie 🗌								
and address of previous operator								<del></del>				
IL DESCRIPTION OF WELL Lease Name	AND LEA	SE							<del></del>			
Grace Federal 6	Well No. Pool Name, Including Formation						Kind of Lease No.			ener Vo		
Location	lR Lybrook Gallu				Sallup		200	Federal of Fe		078362		
Unit Letter K	_:_174	5	Feet From	n The S	outh Lin	2150	).		Woot			
Section 6 Township	<b>23</b> N						F	et From The	west	Line		
,000	-		Range			MPM, Rio	Arriba			County		
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	SPORTE	R OF OIL	AND	NATU	RAL GAS							
Conoco Oil	$\boxtimes$	or Condens	de _		Address (Giv	e address so wi	ich approved	copy of this fo	om is to be se	जर)		
Name of Authorized Transporter of Carine	thead Gas	XX 0	r Dry Ga		P. O. Box 1429 Bloomfield NM 97				1 97/12			
Bannon Energy, Inc.  If well produces oil or liquids,					3934 F.	M. 1960	uck approved West Su	d copy of this form is to be sent) itte 240, Houston TX 770				
ive location of tanks.	iki	6 12	3N I	61.1	it far scrisii	y commerced?	When	?	100500	1 IX //U		
this production is commingled with that ! V. COMPLETION DATA	from any other	r lease or po	ol, give o	Commineli	yes		9	-29-89				
V. COMPLETION DATA						×:	<del></del>					
Designate Type of Completion	- (X)	Oil Well 	Gas	Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v		
Date Specified	Date Compl	. Ready to P	10dL		Total Depth		L	12222	<del></del>	<u>i</u>		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				7. 84			P.B.T.D.				
efforations				Top Oil/Gas Pay			Tubing Depth					
414400			·					Depth Casing	Shoe			
	π	IBING C	A SINC	ANTAS	CE TENNE	You have	12					
HOLE SIZE	TUBING, CASING AND CASING & TUBING SIZE			E D	DEPTH SET			CACKS OF ITS				
							<u> </u>		ACKS CEME	<u> </u>		
					_JAN3	0 19 <b>90</b>						
TEST DATA AND DECUME					DIL CO	N. DIV	<b></b>					
TEST DATA AND REQUES  IL WELL  (Test must be other to	T FOR AL	LOWAB	LE		DIS	T. 3						
IL WELL (Test must be after re	Date of Test	HAMPLE OF	oga ou a	ind musi b	e equal to or a	exceed top allow thod (Flow, pur	vable for this	depth or be fo	r full 24 hour:	r.)		
ength of Test	<b>89</b> 11						·φ, gas tyt, as	c.,				
	Tubing Press	ure			Casing Paris	CGE	IAE	Size		<del></del>		
ctual Prod. During Test	Oil - Bbls.		<del></del>		Water - Bolk	1040		GENCE				
GAS WELL	·					JAN2 6	_					
comi Prod. Test - MCF/D	Length of Te				C	IL CON	V. DIV					
		••			Bbls. Condens	LE CONTENT	3	Gravity of Co	odensate			
sting Method (pitot, back pr.)	Tubing Press	ure (Shut-in)		i i	Casing Pressur			Choke Size		• • •		
I OPERATOR CERTIFICA												
I. OPERATOR CERTIFICATION OF THE PROPERTY OF T				E		U COM	25014	<b></b>				
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 barrier and complete to the barrier and					OIL CONSERVATION DIVISION							
is true and complete to the best of my knowledge and belief.					Date Approved JAN 3 0 1990							
ash to f					Date Approved							
Signature W. J. Holcomb					Ву	·	Bin	d				
Printed Name		, Banno	1.	rgy					70:07 1			
1-25-90 (505) 326-0550 Tide					TitleSUPERVISOR DISTRICT #3							

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
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.

Telephone No.

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 the such changes of operator, well name or number, transporter, or other such changes.