

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240
DISTRICT II
P.O. Drawer DD, Aztec, 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 Bannon Energy Incorporated		Well API No. 30-039-024537
Address 3934 F.M. 1960 West, Suite 240, Houston, Texas 77068		
Reason(s) for Filing (Check proper box)		
New Well ☐	Change in Transporter of: Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐	☒ Other (Please explain) Change Well Name from Nancy 14-1R to LYBROOK SOUTH
Recompletion ☐		
Change in Operator ☐		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name LYBROOK SOUTH	Well No. 1	Pool Name, Including Formation Lybrook Gallup	Kind of Lease State ☒ Federal ☐ Fee	Lease No. SF-078360
Location				
Unit Letter B	: 797	Fect From The North	Line and 1682	Fect From The East
Section 14	Township 23N	Range 7W	NMFM, Rio Arriba	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Giant Refining Company	☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent) P.O. Box 9156, Phoenix, AZ 85068
Name of Authorized Transporter of Casinghead Gas Bannon Energy Incorporated	☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent) 3934 F.M. 1960 West, Suite 240, Houston, Texas 77068
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 14
	Twp. 23N	Rge. 7W
	Is gas actually connected? YES	When? 10/28/89

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

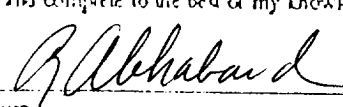
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Rec'y	Diff Rec'y
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

V. TEST DATA AND REQUEST FOR ALLOWABLE

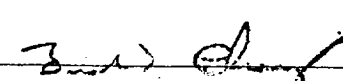
OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable production for 72 hours.)			
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pressure, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke 1990
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	OIL CON. DIV DIST. 3
GAS WELL			
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (flow, back pr.)	Tubing Pressure (Start in)	Casing Pressure (Start in)	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
R.A. Chabaud, Vice President-Operations
Printed Name
October 25, 1990
Date
(713)537-9000
Telephone No.

OIL CONSERVATION DIVISION

Date Approved NOV 1 1990
By 
Title SUPERVISOR 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 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.