nit 5 Copies mediate District Office STRICT P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Revised 1-1-29

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

DISTRICT II 20. Drawer DD, Astonia, NM \$2210

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Well API No. Bannon Energy, Incorporated c/o Holcomb Oil & Gas 30-039-24545 P.O. Box 2058, Farmington NM 87499 Resson(s) for Piling (Check proper box) Other (Please explain) New Wall Change in Transporter of: Recompletion Dry Gas Oil Name change from McBee B 7-5Y Change in Operator Casinghead Gas Condensate If change of operator give name and address of previous operator IL DESCRIPTION OF WELL AND LEASE Pool Name, Including Formation Lybrook Gallup Kind of Lease State, Federal or Fee McBee 7 SF 078362 Location 1757 Feet From The North Line and 745 ___ Feet From The West 23N Township , NMPM, Rio Arriba County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) <u>.</u>Y-X Conoco, Inc. P.O. Box 1429, Bloomfield, NM 87413 Name of Authorized Transporter of Casinghead Gas Address (Give address to which approved copy of this form is to be sent) XX or Dry Gas Cole Development Co. P.O. Box 191, Farmington, NM If well produces oil or liquids, give location of tracks. Unit Sec. Twp. Is gas actually connected? When? 123N ___6₩ yes 10-19-89 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 Compl. Ready to Prod. Total Depth Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth Perforation 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 Producing Method (Flow, pump, gas lift, etc.) Date of Test Length of Test Tubing Pressure Casing Pressure MOV 2 0 1989 Actual Prod. During Test Oil - Bbis. Water - Bbls. CON. **GAS WELL** Dist. 🤅 Actual Prod. Test - MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate lesting Method (pilot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size VI. OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION I hereby certify that the rules and regulations of the Oil Conservation died with a is true and complete to the best of my knowledge and belief. NOV 20 1989 Date Approved ____ J. Holcomb, Operating Agent, Banno

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Printed Name 11-20-89

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

Title_

SUPERVISOR DISTRICT #3

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

(505) 326-0550

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 each pool in multiply completed suelle