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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

## State of New Mexico Energy, Minerals and Natural Resources Department

DISTRICT II P.O. Drawer DD, Arlesia, NIM \$8210

## OIL CONSERVATION DIVISION P.O. Box 2088

				UX 2U00		•	
DISTRICT III		Sa	nta Fe, New M	exico 87504-208	8	•	
1000 Rio Brazos Rd., Aztec, NM & I.	7410 RE(	QUEST FO	OR ALLOWAI	BLE AND AUTH	ORIZATI	ON	
Operator		_ TO TRA	NSPORT OIL	AND NATURA	GAS		,
Barmon Energy,		Well API No.					
Address			30-039-22743				
P.O. Box 2058	3, Farmin	gton, NM	87499				
Reason(s) for Filing (Check proper	bez)			Orber (D)	<del> </del>		
New Well	-	Change in	Transporter of:	Other (Please	e explain)		
Recompletion	Oil	(3)	Dry Gas	Effect	ive Jan	uary 1, 1990	
Change in Operator XX	Caring	bead Gaz XX				• •	
If change of operator give name				1.			
and address of previous operator		CLUCING	LID Partne	rship, P.O. Bo	ox 2009	Amarillo, TX	79189
II. DESCRIPTION OF WI	ELL AND L	EASE					
Lease Name			Pool Name, Includ	ing Econotics	<del></del>	STATE	
South Blanco Stat	:e 32A	1	Lybrook	Gallup Ext.		Kind of Lease Federal or Fee	Less No. E-6833
Location							E-0033
Unit Lener 0	: 4	50	Feet From The	south Line and	2545	Feet From The	east
Section 32 To	vahip 2	4N	Range 7W	, NMPM,	Rio	Arriba /	
III. DESIGNATION OF T	<b>D</b> 43100000						County
III. DESIGNATION OF T	KANSPORT	TER OF OI	L AND NATU	RAL GAS			

South Blanco State	32A	l Lybrook	Gallup Ext.	3	Federal or Fee	E-683	ase No.	
Location 0	450					E-00.	<del></del>	
Om Lener	<del></del>	Feet From The _	south Line and	2545 <b>F</b> e	set From The	east	Line	
Section 32 Towns		Range 7W	, NMPM,	Rio Arr	iba,		County	
III. DESIGNATION OF TRA Name of Authorized Transporter of Oil	NSPORTER (	OF OIL AND NATI	URAL GAS		t			
Permian	Address (Give address to which approved copy of this form is to be sent)							
Name of Authorized Transporter of Cas	inghead Gas	P.O. Box 1183, Houston, TX 77251						
Bannon Energy, Inc.	Address (Give address to which approved copy of this form is to be sent) 3934 F.M. 1960 West, Suite 240 Houston, TX.7706							
if well produces oil or liquids	Unit Sec	- Twp. Rev	L Is gas actually connected?	west,Su	ite 240 H	ouston	TX.770	
ive location of tanks.	i A i 3:	2 124N 17W	VAC		in ? 10-20-81			
this production is commingled with the V. COMPLETION DATA	k from any other le	ase or pool, give commin	gling order number:		10 20 01		<del></del>	
T. COMPLETION DATA	<del></del> ,							
Designate Type of Completio	n - (X)	il Well Gas Well	New Well   Workover	Deepen	Plug Back Sa	me Res'v	Diff Resv	
	Date Compl. Re	eady to Prod.	Total Depth	<del></del>	P.B.T.D.		<u> </u>	
Elevations (DF, RKB, RT, GR, etc.)	Name of Produc	cing Formation	Top Oil/Gas Pay	Tubing Depth				
erforations								
					Depth Casing S	boe	· · · · · · · · · · · · · · · · · · ·	
	TUB	ING, CASING ANT	CEMENTING RECO	מפו				
HOLE SIZE	CASING	S & TUBING SIZE	DEPTH SE	SACKS CEMENT				
				- CONSTRUCTION OF THE PROPERTY				
<u> </u>								
V. TEST DATA AND REQUE	ST FOR ALL	OWABLE		<del></del>				
Date First New Oil Run To Tank	Date of Test	olume of load oil and mu	t be equal to or exceed top allowable for this depth or be for full 24 hours.)  Producing Method (Flow, pump, gas lift, etc.)					
4.69				р <b></b>				
ength of Test	Tubing Pressure		Casing Pressure	Doctor   VE				
Actual Prod. During Test	Oil - Bbls.		Water - Bbls.	FEB2 6 1990				
GAS WELL	<del>-1</del>				011 00			
Actual Prod. Test - MCF/D		Bbls. Condensate/MMCF		OIL CON. DIV.				
			Dois: CoddCatable[iv]CF	and the state of the second	Gravity of Di	APS	* : ***	
sating Method (pitot, back pr.)	Tubing Pressure	(Shut-in)	Casing Pressure (Shut-in)	Choke Size				
L OPERATOR CERTIFIC	TATE OF CO	OMOT TANCE	-		<u> </u>		<u>;</u>	
I hereby certify that the rules and regi	stations of the Oil (	JIVIPLIANCE		NCEDV	ATION DI	VICIO		

en complied with and that the information given above

is true and complete to the best of my knowledge and belief. J. Holcomb Agent Printed Name Title (505) 326-0550

FEB 26 1990 Date Approved

SUPERVISOR DISTRICT 13 Title.

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 Table in Chair and a second and a conditional variable in the changes.