

DISTRICT II
P.O. Drawer DD, Artesia, 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
TO TRANSPORT OIL AND NATURAL GAS

| | | |
|---|--|------------------------------|
| Operator Bannon Energy, Inc. c/o Holcomb Oil & Gas, Inc. | | Well API No. 30-039-24558 |
| Address P.O. Box 2058, Farmington, NM 87499 | | |
| Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Change in Transporter of: Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Operator <input type="checkbox"/> Casinghead Gas <input checked="" type="checkbox"/> Condensate <input type="checkbox"/> Other (Please explain) <input type="checkbox"/> | | |
| Effective January 1, 1990 | | |

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|----------------|--|--|------------------------|
| Lease Name Lybrook 19 | Well No. 2R | Pool Name, including Formation Devils Fork Gallup | Kind of Lease State, Federal or Fee | Lease No. SF 078562 |
| Location Unit Letter K : 2122 Feet From The south Line and 1707 Feet From The west Line Section 19 Township 24N Range 6W , NM PM, Rio Arriba County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | | | | | |
|---|---|------------|-------------|------------|-----------------------------------|-------------------|
| Name of Authorized Transporter of Oil Conoco Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) P. O. Box 1429 Bloomfield, NM 87413 | | | | | |
| Name of Authorized Transporter of Casinghead Gas Bannon Energy, Inc. <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) 3934 F.M. 1960 West Suite 240, Houston TX 77068 | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit K | Sec. 19 | Twp. 24N | Rge. 6W | Is gas actually connected? yes | When? 11-21-89 |

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 Res'v | Diff Res'v |
| 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 | | SACKS CEMENT | | | | | |
| JAN 30 1990 | | | | | | | | |
| OIL CON. DIV | | | | | | | | |

V. TEST DATA AND REQUEST FOR ALLOWABLE

| | | | |
|--------------------------------|-----------------|---|------------|
| Date First New Oil Run To Tank | Date of Test | Producing Method (Flow, pump, gas lift, etc.) | |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| Actual Prod. During Test | Oil - Bbls. | Water - Bbls. | Gas - MCF |

GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test - MCF/D | Length of Test | Bbls. Condensate/MCF | Gravity of Condensate |
| Testing Method (pilot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-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
W. J. Holcomb
Printed Name
1-25-90
Date
Agent, Bannon Energy
(505) 326-0550
Telephone No.

OIL CONSERVATION DIVISION

JAN 30 1990

Date Approved

By

Supervisor District #3

SUPERVISOR DISTRICT #3

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 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 other information.

4) Separate Section VII for changes of operator, well name, or other information.