NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

(Form C-104)
Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

| | | | | Farmin ton, Re | wMex11/10-58 (Date) | |
|--|---------------|-------------|---|--|---|--|
| NE ARE HEREBY REQUESTING Banner Drilling Co. (Company or Operator) | | | | Well No. 4 | ., inNE | |
| | | T 31N R 16W | , nmpmHorseShoe | atlup Ext. Poo | | |
| • | | | C D 6 11 13 | 0/20 | 4ma (2mm)a4a4 33/3 50 | |
| Please indicate location: | | | Elevation 5403 | Total Depth | 29-58 Date Drilling Completed 11/3-58 Total Depth 1400 Ft PBTD 1383 | |
| D | C B | Å | Top Oil/Gas Pay | Name of Prod. Form. | : ::11 ::::::::::::::::::::::::::::::: | |
| E | F G | H | | 1246 Depth Casing Shoel 350 | | |
| L | KJ | I | OIL WELL TEST - | | Choke | |
| | | | | bbls.oil,bbls wat ure Treatment (after recovery of | er in hrs, min. Size | |
| М | N O | P | load oil used): 125 GAS WELL TEST - PÜÀ | | n' 24 hrs,min. Size 2 | |
| Size | Fret | Sax 100 | Method of Testing (pitot Test After Acid or Fract Choke Size Meth | MCF/Day; Hours flow , back pressure, etc.): ure Treatment: od of Testing: nt (Give amounts of materials use | MCF/Day; Hours flowed | |
| 2 ½ | | | Casing Tubing Press Press | Date first new oil run to tanks Nov | 8th, 1958 | |
| 1 | | | Oil Transporter El F | aso Natl. as rodu | ete Co. Line | |
| lemarks: | | | Gas Transporter | | | |
| I here | by certify th | at the info | rmation given above is tr | ue and complete to the best of m | y knowledge. Com | |
| pproved | •••••• | •••••• | NOV 1 ft 195t , 19 | Banner Urilling (Compan | y or Operator) | |
| 0 | IL CONSEI | RVATION | COMMISSION | By: (Si | gnature) | |
| Original Signed Emery C. Arnold Supervisor Dist. # 3 | | | | TitleCo-Cwner Send Communica | tions regarding well to: | |
| itle | | | | Name Banner Dril | line Co. | |
| | | | | | min ton. NEW May. | |

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