Suimit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 **Revised 1-1-89**

DISTRICT II P.O. Drawer DD, Artesia, NM \$8210

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Bannon Energy, Inc. 30-039-<u>22586</u> 3934 F.M. 1960 West, Suite 240, Houston, Texas
Resson(s) for Filing (Check proper box) XX Other (Please explain) New Well Change in Transporter of: Recompletion XX Dry Gas Oil Effective 6-1-90 Change in Operator Casinghead Gas Condensate Chage of address f change of operator give name and address of previous operator IL DESCRIPTION OF WELL AND LEASE Lease Name Well No. | Pool Name, Including Formation South Blanco Federal 6 Kind of Lease Lease No. Lybrook Gallup State, Federal or Fee NM 23050 Location 330 Unit Letter Feet From The north Line and 2310 Feet From The west Section 6 Township 23N Range 7W NMPM, Rio Arriba County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Address (Give address to which approved copy of this form is to be sent) or Condensate Giant Refining Company P. O. Box 9156, Phoenix, AZ 85068 Name of Authorized Transporter of Casinghead Gas XX Address (Give address to which approved copy of this form is to be sent)
3934 F.M. 1960 West, Suite 240, Houston, TX. or Dry Gas Bannon Energy, Inc. 77068 If well produces oil or liquids, give location of tanks. Two 23N 7WRge. Unit Is gas actually connected?
Yes When? 4-16-81 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 Designate Type of Completion - (X) 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 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 Date of Test Producing Method (Flow, pump, gas lift, etc.) Length of Test

MAY2 2 1990 **GAS WELL** Actual Prod. Test - MCF/D Length of Test Bbls. Coodenmie/MMCF DIST. 3 Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size

Casing Pressure

Water - Bbls

VL 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.

Actual Prod. During Test

Signature Agent Printed Name Title 713 537-9000 5-18-90 Deta

OIL CONSERVATION DIVISION MAY 22 1990

Gas- MCF

Date Approved

3.1) el

SUPERVISOR DISTRICT 13

Title_

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

Tubing Pressure

Oil - Bbls

- 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 must be filed for each pool in multiply completed well-

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