Submit 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
See Instructions
at Bottom of Page

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., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

Operator		1010	INO	PURI UI	LANUNA	TURAL G		4 To 7 X 7	·		
BANNON ENERGY, INC.							Well API No. 30-039-23736				
Address							3	0-039-2.	-039-23/36		
3934 F.M. 1960 We	st, Su	ite 240), E	Houston,	Texas 7	7068					
Reason(s) for Filing (Check proper box)	<u>-</u>					ner (Please expl	ain)				
New Well Change in Transporter of: Change in owner											
Recompletion Oil Dry Gas Change in owner Thance in Operator V											
Change in Operator X	Casinghe	ad Gas	Cond	densate	Jan	uary 1,	1989	ive date	•		
If change of operator give name and address of previous operator Jac	k A. C	ole, P	0.	Box 19		ngton, N					
II. DESCRIPTION OF WELL	AND LE	ASE									
Lease Name	ng Formation Kind			of Lease No.							
Marcus						Gallup-Dakota Sua			1	078362	
Location											
Unit LetterE	_ : <u>1830</u>	<u> </u>	Feet	From The No	orth Lin	750'	Fo	et From The	West	Line	
		· ··									
Section 5 Township 23N Range 6W , NMPM, Rio Arriba County											
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS											
Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)									int)		
Giant Refining Co. Name of Authorized Transporter of Casinghead Gas						P.O. Box 9156, Phoenix AZ 85068 Address (Give address to which approved copy of this form is to be sent)					
										int)	
If well produces oil or liquids,	Gas Company of New Mexico					ox 26400			M 8/125		
give location of tanks.					Is gas actually connected? When yes Oc			? :tober 17, 1985			
If this production is commingled with that f						ber		roper I	7, 1905		
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.	l		
Elevations (DF, RKB. RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth			
Perforations											
TO COLOMBICATE								Depth Casin	g Shoe		
		TIDNIC	CAC	DIC AND	CE) C) PR	NG PEGOD					
TUBING, CASING AND HOLE SIZE CASING & TUBING SIZE						· · · · · · · · · · · · · · · · · · ·					
TIOLE SIZE	CASING & TOBING SIZE				DEPTH SET			SACKS CEMENT			
								·			
V. TEST DATA AND REQUES											
OIL WELL (Test must be after re			of load	d oil and must	be equal to or	exceed top allo	wable for this	depth or be j	for full 24 hou	rs.)	
Date First New Oil Run To Tank	Date of Te	:র			Producing M	ethod (Flow, pu	mp, gas lift, e	tc.)			
Length of Test	Tubing Pressure				Casing Press			Choke Size			
,	Tabing Freduit				Charles I resource						
Actual Prod. During Test Oil - Bbls.				Water - Bbis.			Gas- MCF				
GAS WELL					•			† 1 			
Actual Prod. Test - MCF/D						Bbls. Condensate/MMCF			Gravity of Condensate		
										J.	
esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
VI. OPERATOR CERTIFICA	ATE OF	COMP		NCE	ا			<u> </u>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
				NCE	(DIL CON	SERV	I NOITA	DIVISIO	N	
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.					Date Approved						
101111						vhhiose(J				
Whole					D	By					
Signature W. J. Holcomb, Operating Agent for Bannon Energy, Inc.					∥ By_						
Printed Name Title					T:11.					s g	
March 7, 1989	(5	05) 326-(ll little						
Date		Telep	hone	No.							

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 number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.