

Submit 5 Copies  
Appropriate District Office  
DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240  
DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210  
DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico  
Energy, Minerals and Natural Resources Department  
**OIL CONSERVATION DIVISION**  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

3053/N

Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

**REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS**

**I. OPERATOR**

Operator Bannon Energy, Incorporated c/o Holcomb Oil & Gas	Well API No.
Address P.O. Box 2058, Farmington NM 87499	
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> <input type="checkbox"/> Other (Please explain) Recompletion <input type="checkbox"/> Change in Transporter of: Change in Operator <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator	

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name Grace Federal 6	Well No. 2	Pool Name, Including Formation Lybrook Gallup	Kind of Lease State, Federal or Fee	Lease No. SF978362
Location Unit Letter M : 500 Feet From The FSL Line and 500 Feet From The FWL Line Section 6 Township 23 North Range 6 West , NMPM, Rio Arriba County				

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Conoco, Inc.	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 <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Cole Development Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 191, Farmington, NM 87499					
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 6	Twp. 23N	Rge. 6W	Is gas actually connected?	When ?
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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 9-18-89	Date Compl. Ready to Prod. 10-7-89		Total Depth 5750'		P.B.T.D. 5700'			
Elevations (DF, RKB, RT, GR, etc.) 6874' GR	Name of Producing Formation Mayre-Gallup		Top Oil/Gas Pay		Tubing Depth 5602			
Perforations 5488-5508'' 5528-5568'					Depth Casing Shoe			
<b>TUBING, CASING AND CEMENTING RECORD</b>								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/2	8-5/8		304		190 sx Cl. b 3% CaCl2			
7-7/8	4 1/2		5749		w/1/2#/sx cello seal			
					400 sx-1st stage. 2nd stage-			
					w/650 sx 65-35 poz			

**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 10-7-89	Date of Test 10-10-89	Producing Method (Flow, pump, gas lift, etc.) gas lift	
Length of Test 24	Tubing Pressure 100	Casing Pressure 360	Choke Size N/A
Actual Prod. During Test	Oil - Bbls. 15	Water - Bbls. 0	Gas - MCF 227
<b>GAS WELL</b>			
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	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 W. J. Holcomb, Operating Agent, Bannon  
Date 10-19-89 Title (505) 326-0550  
Telephone No.

**OIL CONSERVATION DIVISION**

Date Approved OCT 07 1989

By Original Signed by FRANK T. CHAVEZ

Title SUPERVISOR DISTRICT III

**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 data and 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.