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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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Bannon Energy, Inc. c/o Holcomb Oil & Gas, Inc.	Well API No. 30-039-24546
Address P.O. Box 2058, Farmington, NM 87499	
Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> 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 type="checkbox"/> Condensate <input type="checkbox"/> Other (Please explain) <input type="checkbox"/>	

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name McBee 7	Well No. 6	Pool Name, Including Formation Lybrook Gallup	Kind of Lease State, Federal or Fee	Lease No. SF 078359
Location Unit Letter K : 2040' Feet From The South Line and 2140' Feet From The West Line Section 7 Township 23N Range 6W, NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Conoco, Inc. <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 Cole Development Co. <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	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 K	Sec. 7	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 9-29-89	Date Compl. Ready to Prod. 10-12-89		Total Depth 5710'		P.B.T.D. 5662'			
Elevations (DF, RKB, RT, GR, etc.) 6946' GR	Name of Producing Formation Gallup Mayre		Top Oil/Gas Pay		Tubing Depth			
Perforations 5508-5528, 5551-5598					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/2	8-5/8	302	190 sx Class B & 280 sx
			65/35 poz & 100 sx 50/50 poz
4 1/2	7-7/8	5703	540 sx 65/35 poz & 50 sx
			Class B 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 10-18-89	Date of Test 10-18-89	Producing Method (Flow, pump, gas lift, etc.) plunger lift	
Length of Test 12	Tubing Pressure 400	Casing Pressure 580	Choke Size N/A
Actual Prod. During Test	Oil - Bbls. 212	Water - Bbls. 960	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
W. J. Holcomb Agent, Bannon Energy
Printed Name Title
10-19-89 (505) 326-0550
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved 10-19-89

By Original Signed by FRANK T. CHAVEZ

Title SUPERVISOR DISTRICT 3

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.