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Appropriate District Office
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P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
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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 JACK A. COLE		Well API No. 30-039-24360
Address P. O. BOX 191, FARMINGTON, NEW MEXICO 87499-0191		
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Operator <input type="checkbox"/>		<input checked="" type="checkbox"/> Other (Please explain) FRAC OIL HAS BEEN RECOVERED.

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name GRACE FEDERAL 24	Well No. 24-2	Pool Name, Including Formation DEVILS FORK ASSOC.	Kind of Lease FED. State, Federal or Fee	Lease No. SF-078563
Location Unit Letter F : 1850 Feet From The N Line and 1820 Feet From The W Line Section 24 Township 24N Range 7W, 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"/> GIANT REFINING COMPANY	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 256, FARMINGTON, NEW MEXICO 87499-0256						
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> BANNON ENERGY INC.	Address (Give address to which approved copy of this form is to be sent) 3934 F.M. 1960 WEST, SUITE 240, HOUSTON, TEXAS						
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 24	Twp. 24N	Rge. 7W	Is gas actually connected? YES	When? 1-9-89	77068

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	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 12-9-88	Date Compl. Ready to Prod. 1-4-89		Total Depth 5638		P.B.T.D. 5597			
Elevations (DF, RKB, RT, GR, etc.) 6621 GR	Name of Producing Formation DEVILS FORK ASSOC.		Top Oil/Gas Pay 5319		Tubing Depth 5476			
Perforations 5319-28, 5440-48, 5456-62, 5511-16					Depth Casing Shoe 5636			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4	8 5/8		259.51		250 SKS. 259 FT.			
7 7/8	4 1/2		5536		875 SKS. 1791 FT.			

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 8-30-91	Date of Test 8-31-91	Producing Method (Flow, pump, gas lift, etc.) PUMP	
Length of Test 24 HOURS	Tubing Pressure 105 PSI	Casing Pressure 105 PSI	Choke Size N/A
Actual Prod. During Test 60	Oil - Bbls. 1.5	Water - Bbls. NONE	Gas - MCF

GAS WELL

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
BANNON ENERGY, INC.-JACK A. COLE, AGENT

Printed Name
DECEMBER 13, 1991

Date
325-1415

Telephone No.

OIL CONSERVATION DIVISION

Date Approved DEC 16 1991

By Frank J. Cole

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 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.