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, Antesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aziec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

T	REQ					AUTHOR						
I. Operator		TOTRA	NS	PORT OIL	L AND NA	TURALG						
Bannon Energy Incorporated, c/o Holcomb Oil									II API No.			
	orporate	a, c/o	HOT	.comb 01	1 and Ga	s, Inc.	30-	-039-243	72			
Address				_								
P. O. Box 2058, F		n, NM	3/49	19				1982				
Reason(s) for Filing (Check proper bo	x)				Ou	her (Please exp	lain)	1.19		IWE		
New Well 🔀		Change in			Po	auest fo	x 211057	ahla				
Recompletion	Oil		Dry	Gas 📙	r.e	duest it	or allowa	mre				
Change in Operator	Casinghe	ad Gas 🔲	Conc	lensate 🔲					MAYI 1	: 19 89		
f change of operator give name								····	A 44 20c			
and address of previous operator										V. DIV		
I. DESCRIPTION OF WEI	L AND LE	ASE							ះទូរ			
Lease Name			Pool	Name, Includi	ing Formation		Kind	of Lease		ease No.		
Mesa 25		3-R		scrito (-		•	Federal or Fe		78532		
Location		<u> </u>	.L		-	· · · · · · · · · · · · · · · · · · ·			102 0	70332		
Unit Letter M	9	60 '	_	Sc	วม+h	ne and	١٠.		Wost			
Unit Letter	:		Fect	From The	Lir	ne and	Fe	et From The.	West	Line		
Section 25 Town	nship 24N		D	e 7W		neme Di	o Arriba	_				
. Section 25 Town	milb 2 114		Rang	e / + Y	, <u>N</u>	impm, Ri	O ALLIDO	ء 		County		
II. DESIGNATION OF TR	ANCRODIT	ED OF O	TT A	י דייר גוב ביום	DAY CAS					4 1 I		
Name of Authorized Transporter of O	4	or Conden		IND INATU			.Lieb					
GiantRefining	X					we address to w				eni)		
Name of Authorized Transporter of Ca	ninghand Car			C		ox 9156,						
-	-	\square	ועדטו	ry Gas 🚃		we address to w						
Gas Company of Ne						ox 26400		uerque,	NM 8712	<u> 5</u>		
If well produces oil or liquids, rive location of tanks.	Unit	Sec.	Twp.	-	Is gas actual	ly connected?	When	?				
	<u> </u>	25	24		yes			5/8/89				
this production is commingled with t	hat from any of	her lease or	pool, g	give comming!	ling order num	iber:						
V. COMPLETION DATA												
D		Oil Well		Gas Well	New Well	Workover	Deepen	Piug Back	Same Res'v	Diff Res'v		
Designate Type of Completi	on - (X)	^_			.l . ×	İ	i	İ	i	ĺ		
Date Spudded		pl. Ready to	Prod.		Total Depth			P.B.T.D.	·			
4/15/89	5/ 8 /89				5755			5721				
Elevations (DF, RKB, RT, GR, etc.)	Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tuhing Denth			
GL 6909 Gallup				5588				Tubing Depth 5674				
erforations								Depth Casin				
5588-5615; 5626-4	6; 5655-0	67 all	@ 4	JSPF				ļ	5748			
		TIRING	CAS	ING AND	CEMENTI	NG PECOI	20					
HOLE SIZE		TUBING, CASING AND CASING & TUBING SIZE							CACVO OFLIFT			
124		8-5/8	Direc	JIZE	DEPTH SET			SACKS CEMENT 225				
7-7/8		$\frac{3 \ 370}{4\frac{1}{2}}$										
7 770				0201	5748			1090				
	——— <u>—</u>	DV Tool @ 3038'										
. TEST DATA AND REQU	ECT FOR	2 3/3	A DY 1	5		674	·-··	<u> </u>	····	·		
OIL WELL (Test must be after Date First New Oil Run To Tank			of toat	ou ana musi					for full 24 hou	ers.)		
	Date of Te					ethod (Flow, p	ump, gas lift, e	uc.)				
5/07/89 ength of Test		/9/89			Flow							
-	1 -	Tubing Pressure			Casing Pressure			Choke Size				
12 hours		475			500			64/64				
actual Prod. During Test	Oil - Bbls.	Oil - Bbls.				Water - Bbis.			Gas- MCF			
		20			0			240				
GAS WELL												
Actual Prod. Test - MCF/D	Length of	Test			Bbis. Conder	neate/MMCF		Gravity of C	ondensate			
esting Method (pilot, back pr.)	ing Method (pitot, back pr.) Tubing Pressure (Shut-in)				Casing Press	ure (Shut-in)		Choke Size				
L OPERATOR CERTIF	TC ATTE OT		TTA	NICTO	1			<u></u>				
				NCE	\parallel ϵ	OIL COM	JSEDV.	ΔΤΙΩΝΙΙ	רו/יוכוכ	ואכ		
I hereby certify that the rules and re Division have been complied with a	`					JI V						
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 MAY 0.7 1989						
$I \cap II$		•			Date	Approve	ed	11 - 1	, U W W			
11 Statem	11	_										
Signature	Bv_	Original S	igned by FR	ANK T. CHA	VEZ							
Signature W. J. Holcomb	Agent !	for Ban	non	Energy	Inc.				· · · · · · · · · · · · · · · · · · ·			
Printed Name			Title		H	À	A Region & will be a					
5/9/89	(505) 32	26-0550			Title			(a "				
Date			phone	No.	11							

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) Separair 🔗