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 85

1000 Rio Brazos Rd., Aziec, NM 87410	3				MEXICO 8/					
I.	REQ	UEST FO	OR AL	LOWA	BLE AND	AUTHORI	ZATION			
Operator		TOTRA	NSPC	ORT O	L AND N	ATURAL G	AS			
•	·							API No.		<u> </u>
Bannon Energy, Inc.					30			0-045-25067		
3934 F.M. 1960 West	. Suite	240 Ha	nue tor	тол	770	. 0				
Reason(s) for Filing (Check proper box)	,	240, 110	— —	1, 10						
New Well		Change in	Transnor	ter of:	XK O	her (Please expl	ain)			
Recompletion	Oil		Dry Gas		Effect	ive 6-1-9	20			
Change in Operator	Casinghe		Condens			ge of addi				
f change of operator give name and address of previous operator				<u></u>		or addi				·
•										
L DESCRIPTION OF WELL	_ AND LE	EASE								
Lesse Name South Blanco Fede	eral 26	Well No.	Pool Na	me, Includ	ing Formation		Kind	of Lease		
Location	:Lal 20	1	L	ybrod	k Gallu	p		, Federal or Fe	MM 12	Lean: No. 233
Unit Letter H	— : <u>—</u> 2	290	Feet From	m The <u>n</u>	orth L	ne and _330		ect From The	636 +	
Section 26 Towns	hin 24	N	_	8W					Cast	Line
Section Towns	IID -		Range	OW		IMPM,	San	Juan		County
II. DESIGNATION OF TRA	NSPORTI	FD OF OT	T A RIP	NI A TITE	TD 1.7					
		or Conden	U ANU	MAIL	Addres /	no palations :		 		
Giant Refining Compa	any				P. 0	we address to wh	uch approve Dhaan	a copy of this fo	mm is to be s	seni)
Name of Authorized Transporter of Casi	nghead Gas	XX	or Dry G	3.5	Address (C)	Box 9156,	Phoeni	x, AZ 85	068	
Bannon Energy, Inc.			, _	ــــــ	3934 F	we address to wh .M. 1960	w <i>ca approve</i> West	a copy of this for	rm is to be s	tent)
if well produces oil or liquids, ive location of tanks.	Unit	Sec.	Twp.	Rge	is gas actual	ly connected?	When		, nous	ton, TX. 7
	H	26	24N	ผม	1	<u>.</u>	19-2-			
this production is commingled with the V. COMPLETION DATA	t from any od	her lease or p	ool, give	comming	ling order nun	iber:				
COM LETION DATA			· ·				· · · · · · · · · · · · · · · · · · ·			
Designate Type of Completion	1 - (X)	Oil Well	Ga	s Well	New Well	Workover	Doepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded		pl. Ready to								
-	J	h. Keary W	Piod.		Total Depth		-	P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay					
						rey		Tubing Depth		
Perforations					<u>.L.,</u>			Dooth Code		
								Depth Casing	2006	
		TUBING,	CASIN	G AND	CEMENTI	NG RECORI	D			
HOLE SIZE	CA	SING & TUI	BING SIZ	ZE		DEPTH SET		SACKS CEMENT		
								GACKS CEMENT		
	 		<u> </u>					†		
										
. TEST DATA AND REQUE	CT FOD A	II OW	DI D		<u> </u>					
IL WELL Test must be often	DI FOR A	LLLUW A	BLE							
IL WELL (Test must be after use First New Oil Run To Tank	Date of Te	a volume o	1000 ou	and must	be equal to or	exceed top allo	wable for thi	s depth or be fo	r full 24 hou	ers.)
	Sec or 16.	*			Producing Method (Flow, pump, gas lift, et			uc.)		
ength of Test	Tubing Pre	SBITE			Casing Press			1		
					CAMB FIEED	ire		Choke Size		
ctual Prod. During Test	Oil - Bbls.	·			Water - Bbls		(D)	EE	LVI	
					.,		IK			1111
GAS WELL					<u>L</u>			MIVO) 100n -	
coul Prod. Test - MCF/D	Length of	Test			· ·			MAY22	1330	
					Bbls. Conden	sate/MMCF	. (SF'FF	1-00	
sting Method (pilot, back pr.)	Tubing Pre	saure (Shut-ii			Contra					• •
• •			4,		Casing Press	ire (Shut-in)		Choke	1. 3	
I OPERATOR CERTIFIC	1 TT 0=	00:=			<u></u> .					
L OPERATOR CERTIFIC	AILOF	COMPL	LANC	Œ		NI 00***				
I hereby certify that the rules and regul Division have been complied with and	Mions of the	Oil Conserva	tion		(DIL CON	SERV	ATION D	NVISIC	N
is true and complete to the best of my	inowledge an	nausa given id belief.	adove		[]			MAY 22		
1011.	-9				Date	Approved	l			
hx/Hothomal	_					.,			1	,
Signature					By_		B	<i>سان ها</i>	deserted.	
W.J. Holcomb		Age	nt		-, -			RVISOR D	•	42
Printed Name 5-18-90 713	537-9000	1	itle		Title		JUI E	un u	I DIN I	FJ
	— w/ !!!									

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

713 537-9000

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance

Title.

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Telephone No.

- 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.

