Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM \$8240

DISTRICT II P.O. Drawer DD, Arlesia, NIM \$8210

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM \$7410		3	anta Fe	, New M	exico 8750	04-2088	٠		1			
I	REC	UEST F	FOR AL	LOWA	BLE AND A	AUTHO	RIZATIO	NC				
Operator						TURAL		Well A	PI No		·	
Bannon Energy, Ir	. T)-045-25216							
P.O. Box 2058, 1 Reason(s) for Filing (Check proper box)	Parming	gton, N	M 87	499								
New Well		O	-	_	Oth	er (Please e	xplain)					
Recompletion	Oil	Change i	ia Transpo ≎ry Ga		E:	ffectiv	e Janu	arv	1, 199	0		
Change in Operator XX		ead Gas XX						4	_,	•		
If change of operator give name and address of previous operator Mes.					nip, P.O.	Box 2	009 Am	ont 1	1 - mv	70100		
TT DESCRIPTION OF MELL	AND LI	EASE			,	247.2	UUJ AIII	arri	10, TX	79189		
Lease Name			Pool N	ame, Includi	ing Formation			Kind of	1			
South Blanco Federal	25	6			llup Ext	:•			Sor Fe		222 No. 12233	
_	2.2										12233	
Our Deler	_:	40	_ Feet Fro	om The	north Lin	and	700	Fee	From The	west	Line	
Section 25 Toward	ip 24N		Range	8W	. NI	мем.	San Ju	an	1 [‡]			
III DESIGNATION OF THE A						*** ***			11		County	
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	D NATU	RAL GAS										
Permian	XX	Or Condensate			Address (Give address to which approved				copy of this form is to be sent)			
Name of Authorized Transporter of Casia	shead Gas	 XX	or Day	Gas 🗀	P.O. Box 1183, Houston				n. TX. 77251			
Bannon Energy, Inc.	Bannon Energy, Inc.				Address (City address to which approved				capy of this form is to be sent): ite 240 Houston, TX.7706			
If well produces oil or liquids, give location of tracks.	Unit	Cent Sec. Twp. Rge. Is gas actually connected?					When?		nouston	1/TX - / /06		
	E] 25	124N	1 Q1.7	****				7 -15 – 81			
If this production is commingled with that IV. COMPLETION DATA	from any o	ther lease or	r pool, giv	e commingl	ing order numb	er.						
The state of the s		Oil Wel			,							
Designate Type of Completion	- (X)	 Ori Mel	u je	ias Well	New Well	Workover	Doc	PED	Plug Back	Same Res'v	Diff Res'v	
Date Spadded	Date Compi. Ready to Prod.				Total Depth				P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gar 1	Pav						
Perforations									Tubing Depth			
renorations									Depth Casin	e Shoe		
							_					
HOLE SIZE	TUBING, CASING AND											
7,362 0.25	+	CASING & TUBING SIZE			DEPTH SET				SACKS CEMENT			
									· · · · · · · · · · · · · · · · · · ·			
	1				 							
V Open												
V. TEST DATA AND REQUES OIL WELL (Test must be often.)	ST FOR	ALLOW	ABLE		<u> </u>							
OIL WELL (Test must be after to Date First New Oil Rua To Tank	ecovery of	iotal volume	of load o	il and must	be equal to or	exceed top o	allowable fi	or this d	depth or be f	or full 24 hou	rx.)	
on And 10 12mg	Date of T	cs			Producing Me	shod (Flow,	pump, gas	lift, etc	J			
Length of Test	Tubing P				Corre		- 	y-				
	1.00.116	, CORDIC			Casing Pressure			ſ	Choke Size	ENV	Fin	
Actual Prod. During Test	Oil - Bbis	<u>. </u>			Water - Bbls			- }				
								Ц		.n. e 1000	、 四	
GAS WELL					L				<u> </u>	2 6 199 0	<u> </u>	
Actual Prod. Test - MCF/D	Leagth of	Test			Bbls. Conden	ENEASURE E			ÓU C	ONIC	1iV	
									DIST. 3			
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)				Choke Size			
YIT OFFICE COLUMN						•			·_ 			
VI. OPERATOR CERTIFIC	ATE O	F COM	PLIAN	CE								
I DESCRIPT THE THE PART THE PART OF THE PA	OIL CONSERVATION DIVISION											
Division have been complied with and is true and complete to the best of my	unax the info	o rmation giv and helief	ven above									
					Date	Approv	/ed	<u> </u>	B 261	1990		
- PJ Holeomb	-								Δ			
Signature V . I Hol comb					∥ By_		_7	`ـــــــــــــــــــــــــــــــــــــ	d	المرسم		
Printed Name	W. J. Holcomb Agent											
2-19-90	Title (505) 326-0550				TitleSUPERVISOR DISTRICT #3							
2-19-90 (505) 326-0550					1100							

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
- 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 well-