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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 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410		Santa	a Fe, New 1	Mexico 875	04-2088					
I.	REQU	JEST FOR	R ALLOWA	ABLE AND	AUTHOR	IZATION				
Operator TO TRANSPORT OIL AND NATURAL GAS									<u>.</u>	
Holcomb Oil Address	Oil and Gas, Inc.					l l	II API No. 0-043-05192			
P.O. Box 205	8, Far	mington	ı, NM	87499			-			
Reason(s) for Filing (Check proper bax) New Well		Chance in T		Ou	ner (Please exp	lain)				
Recompletion	Oil	Change in Tra	nsporter of:  y Gas	44 DC	c	_				
Change in Operator X	Caninghea		ndensate	^^ EI	fective	date	11-1-9	2		
If change of operator give name and address or previous operatorB	illco	Energy,	P.O.	Box 205	8, Farm	ington	, NM	87499		
IL DESCRIPTION OF WELL	AND LE	ASE								
Rogers 24		<del></del> ир	Kind of Lease State Federal or Fee SF 078360							
Location		^								
Unit LetterL	_:66	Fee	t From The	west Lin	e and19	80 F	eet From The	south	Line	
Section 24 Townshi	p 23N	Ra	nge 7W	, N	МРМ,	Sandov	al		County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil  Or Condensate  Or Condensate  Address (Give address to which approved copy of this form is to be sent)										
Giant Refining	z LXX				e address to wi	hich approved	d copy of this form is to be sent)			
Name of Authorized Transporter of Casing	P.O. Box 256, Farmington, NM 87499  Address (Give address to which approved copy of this form is to be sent)									
Bannon Energy, Inc  If well produces oil or liquids,				5934 FI	1 1960W	.,Ste	240 Houston, TX 77068			
give location of tanks.	Unit	I See I Tree I To 17					en ?			
If this production is commingled with that IV. COMPLETION DATA	from any othe		give comming	ling order numb	er:		<u> </u>			
		Oil Well	Gas Well	Non 277. 11		·				
Designate Type of Completion	- (X)		OES WEIL	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compl	l. Ready to Proc	1.	Total Depth		·	P.B.T.D.			
vations (DF, RKB, RT, GR, etc.) Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
Perforations										
	·						Depth Casing	Shoe		
HOLE SIZE	T	UBING, CA	SING AND	CEMENTING RECORD						
	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT			
									<del></del>	
			<del></del>							
V. TEST DATA AND REQUES OIL WELL (Test must be often re				L			<u></u> _			
OIL WELL (Test must be after re Date First New Oil Run To Tank	Date of Test	il volume of loa	d oil and must	be equal to or a	exceed top allowhood (Flow, pur	wable for this	depth po Be fo	沙色展	A WEID	
				I localeting lyter	arca (Flow, pur	rup, gas iyi, e		er a ca		
Length of Test	Tubing Pressure			Casing Pressure			Choke Size DEC2 3 1992			
Actual Prod. During Test	Test Oil - Bbls.			Water - Bbls.			Gas-MCDII CON DIV			
GAS WELL		<del> </del>		<u> </u>				DIST	2	
Actual Prod. Test - MCF/D	Length of Te	est		Bbls. Condens	ale/MMCF				. •	
	·			Dois. Condensate (VIIV)Cr			Gravity of Co	ndensate		
esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size			
L OPERATOR CERTIFICA	TE OF	COMPLIA	NCE							
I hereby certify that the rules and regulations of the Oil Conservation				OIL CONSERVATION DIVISION						
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.				DEC 9.94000						
1/14/2				Date Approved						
Signature				By						
W. J. Holcomb President										
Printed Name Title 11-24-92 505-326-0550				TitleSUPERVISOR DISTRICT /3						
Date 24-92		Telephone						·		

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.