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Appropriate District Office
DISTRICT 1
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 Instruction

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088

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

Santa Fe, New Mexico 87504-2088 REQUEST FOR ALLOWABLE AND AUTHORIZATION

•	TOTRAN	SPORT OIL	AND NA	TURAL GA	<u>(S</u>	MF XY			
Bannon En	ergy Inco	ed	ed 30.			DINO. -039-21910-00			
3934 F.M.	1960 Wes	t Suit	e 240	Hous	ston,	Texas	7706	8	
Reason(s) for Filing (Check proper box)  New Well  Recompletion  Change in Operator	Change in Tra Oil Do Casinghead Gas Co	ansporter of: ry Gas	Double E.f.	fectiv	in) e 10	)-1-9	0		
f change of operator give name and address of previous operator	(O Oiland Ga	S Compan	P.O	C. Box 1	610 N	lidland	, TX , 7°	1702	
II. DESCRIPTION OF WELL Lease Name Tonkin	AND LEASE	ool Name, Includio N. Lindre			Kind of State,	of Lease Federal or Fe	SF 08	ar Na 30472A	
Location Unit Letter		ed From The No	orth Lin	and $\frac{185}{0.00}$	50 Fe	et From The	East	Line	
Section / 8 Townshi	<u> </u>	ange 3W		MPM, Ri	o Arr	169		County	
M. DESIGNATION OF TRAN Name of Authorized Transporter of Oil  Menidian Oil Comp. Name of Authorized Transporter of Casin	P. O. Box 4289 Farmington NM 87401  Address (Give address to which approved copy of this form is to be sent)								
El Paso Natural Go	Paso Natural Gas Company			P.O. Box 4990, Farming tow, NM 87499 Is gas actually connected?   When ?					
If well produces oil or liquids, give location of tanks.	G 118 12	4N 3W	Yes	<u> </u>		<u> </u>			
If this production is commingled with that IV. COMPLETION DATA						1	(c p)	big p	
Designate Type of Completion	Oil Well	Gas Well	New Well	Workover	Deepen	İ	Same Res'v	Diff Res'v	
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Form	Top Oil/Gas Pay			Tubing Depth				
Perforations						Depth Casing Shoe			
	TUBING, C	CEMENTING RECORD							
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			
						<del></del>			
V. TEST DATA AND REQUE OIL WELL (Test must be after	ST FOR ALLOWAL recovery of total volume of	BLE load oil and must	be equal to o	exceed top all	owable for th	is depth or be	for full 24 hou	<b>75.</b> )	
Date First New Oil Run To Tank	Date of Test		Producing M	lethod (Flow, po	ump, gas lift,	eic.)			
Length of Test	Tubing Pressure					Choke Size			
Actual Prod. During Test	Oil - Bbls.	Water - Boli	LONU3	199 <b>1</b>	TO25- MCF				
GAS WELL			0		1. DIV	10			
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/10151. 3			Gravity of Condensate				
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in	Casing Pressure (Shut-in)			Choke Size				
VI. OPERATOR CERTIFIC  I hereby certify that the rules and regr Division have been complied with an is true and complete to the best of my	pulations of the Oil Conservand that the information gives	ttion		OIL COI	ed	JAN 0 3		ON	
Signant Russell A. Chabau Vice President	d perations		By_		SUPE		DISTRICT	13	
Printed Name 1/2/91	713–537–900	Title	Title	9					

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.