Submit 5 Cries
A propriate 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 1-1-29

DISTRICT II P.O. Drawer DD, Artesia, NM \$8210

OIL CONSERVATION DIVISION

P.O./Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator Well API No. Bannon Energy, Inc. 30-039-22519 Address 3934 F.M. 1960 West, Suite 240, Houston, Texas 77068 Reason(s) for Filing (Check proper box) Other (Please explain) New Well Change in Transporter of: Recompletion XX Dry Gas Effective 6-1-90 Oil Change in Operator Chane of address Casinghead Gas Condensate If change of operator give name and address of previous operator IL DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation South Kind of Lease Blanco Lease No. Federal 31 Lybrook Gallup State, Federal or Fee NM 33005 Location 2290 Unit Letter Feet From The North 2290 Line and _ east Feet From The Line 31 24N Township Range 7 W San Juan , NMPM, County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Address (Give address to which approved copy of this form is to be sent) or Condensate Giant Refining Company P. O. Box 9156, Phoenix, AZ 85068 Name of Authorized Transporter of Casinghead Gas ΚX or Dry Gas Address (Give address to which approved copy of this form is to be sent) Bannon Energy, Inc. 3934 F.M. 1960 West, Suite 240, Houston, If well produces oil or liquids, give location of tanks. 77068 Unit Sec. Twp Rge. Is gas actually connected? When? <u> 24</u>N G 31 17W If this production is commingled with that from any other lease or pool, give commingling order number: yes 3-31-81 IV. COMPLETION DATA Oil Well Gas Well New Well Workover Designate Type of Completion - (X) Deepen | Plug Back | 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 Formation Top Oil/Gas Pay Tubing Depth Depth Casing Shoe TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE **DEPTH SET** SACKS CEMENT V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.) Date First New Oil Run To Tank Date of Test Producing Method (Flow, pump, gas lift, etc.) Length of Test Tubing Pressure Casing Pressure Actual Prod. During Test Oil - Bbls Water - Bbls. MAY22 1990 GAS WELL OIL CON. DIV. Actual Prod. Test - MCF/D Length of Test Bbls. Condensate/MMCF Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size VL OPERATOR CERTIFICATE OF COMPLIANCE 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. MAY 2 2 1990 Date Approved Signature Built) By _ W.J. Holcomb Agent Printed Name 5-18-90 SUPERVISOR DISTRICT 13 Title

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

Date

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_

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