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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, Antesia, NM 88210 OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator BANNON ENERGY, I		Well API No. 30-039-23073								
Address						<u> </u>				
3934 F.M. 1960 W		te 240,	Houston,							
Reason(s) for Filing (Check proper box) New Well		C :- T		X Oth	er (Please explo	zin)				
	Oil	~ _	ransporter of: Ory Gas	Char	ige in ow	mer				
Recompletion	<u>A</u> 11	All changes effective date								
	Casinghea		Condensate		uary I,					
nd address of previous operator	ck A. Co	le, P.	0. Box 19	1, Farmi	ngton, N	M 87499				
L DESCRIPTION OF WELL	L AND LEA	ASE								
ease Name				of Lease No.						
Mobil Federal	kota Associated State			Federal or Fee SF-078915						
ocation Unit LetterM	:790	<u> </u>	Feet From The _S	outh Lin	e and	0 Fe	et From The <u>W</u>	est	Line	
Section 35 Towns	. N	,NMPM, Rio Arriba								
			Range 3W		·:- 1\ 1	U ALLIII	2		County	
II. DESIGNATION OF TRA Name of Authorized Transporter of Oil	NSPORTE	or Condens			a address to w	high gamana	Lanes of this fam.			
Mobil Oil Corpore		2	ate				copy of this form			
		(ev.	or Dry Gas							
Name of Authorized Transporter of Cas Vented	iligikeau Gas		or Dry Gas	Address (Gn	e adaress to wi	ucn approvea	copy of this form	t is 10 de se	nu)	
f well produces oil or liquids,	Unit				Is gas actually connected? When			?		
ive location of tanks.	M1	35	24N 3W	No						
this production is commingled with the	at from any oth	er lease or po	ool, give comming	ling order num	ber:					
V. COMPLETION DATA				· · · · · · · · · · · · · · · · · · ·			·		·	
Designate Type of Completio	n - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back S	ume Res'v	Diff Res'v	
Date Spudded		ol. Ready to I	Den d	Total Depth	<u> </u>	1				
Zate Spunded	Date Comp	n. Ready to 1	riod.	Total Depui			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of P	roducing For	mation	Top Oil/Gas	Top Oil/Gas Pay			Tubing Depth		
Divisions (D1, 141D, 141, OA, GC.)			nadou	•						
Perforations				<u>-</u>			Depth Casing S	Shoe		
	I	UBING, (CASING AND	CEMENTI	NG RECOR	D				
HOLE SIZE	CAS	SING & TUE	BING SIZE		DEPTH SET			SACKS CEMENT		
									•	
					, , , , , , , , , , , , , , , , , , , ,					
			N. D	1			<u> </u>		·· · · · · · · · · · · · · · · · · · ·	
. TEST DATA AND REQUI									,	
			f load oil and mus		exceed top allethod (Flow, pi			full 24 hou	rs.)	
Date First New Oil Run To Tank	Date of Te	SI.		Producing M	etnoa (<i>r iow, pi</i>	ump, gas iyi, i	eic.)			
Length of Test			Casing Press	ITP.		Choke Size	- 13	14 F 17 F 17 18 18 18 18 18 18 18 18 18 18 18 18 18		
Sengui or rest	Tuoing Fie	Tubing Pressure			Casing 1 resourc					
Actual Prod. During Test	Oil - Bbls.			Water - Bbls	Water - Bbls.					
	0 20						6800000			
CAR TITOL I			······································				1 1 1 1	181 e		
GAS WELL Actual Prod. Test - MCF/D	Ti sandh of	Test		Dhie Conde	note A MCE		Course of Go		- PW	
remai From 1681 - MICE/D	Length of	1 691		Bbis. Condensate/MMCF			Gravity of Gondensale			
esting Method (pitot, back pr.) Tubing Pressure (Shut-in)			in)	Casing Pressure (Shut-in)			Choke Size	- Doll		
VI. OPERATOR CERTIFI	CATEOF		IANCE	1			1			
,					OIL COM	ISERV	ATION D	IVISIO	NC	
I hereby certify that the rules and rep Division have been complied with a	•				·		==			
is true and complete to the best of m		_	- ·- · · ·	D=1	. Annua	؛ لم	map 4 9 10	રૂવ્		
h District					Date Approved			4 2		
						. فالمعنى	in all and			
Signature				By_			1 300		<u> </u>	
W. J. Holcomb, Operatin	g Agent fo			· []			1910% 77	FRICT	# 3	
Printed Name			Title	Title		4, 2, 3, 4, 4, 4, 5				
March 7, 1989 Date	(5	05) 326-0 Telen	phone No.							

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.