

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Bannon Energy Incorporated	Well API No. 30-039=24919
Address 3934 FM 1960 West, Suite 240, Houston, Texas 77068	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Federal 30	Well No. 2	Pool Name, Including Formation Lybrook Gallup	Kind of Lease State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> or Fee	Lease No. NM33003
Location Unit Letter L : 2020' Feet From The South Line and 660' Feet From The West Line Section 30 Township 24N Range 7W, NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Giant Refining Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 9156, Phoenix, AZ 85068					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Bannon Energy Incorporated	Address (Give address to which approved copy of this form is to be sent) 3934 FM 1960 West, Suite 240, Houston, TX 77068					
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 30	Twp. 24N	Rge. 7W	Is gas actually connected? yes	When? 12/27/90

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well x	Gas Well	New Well x	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 11/5/90	Date Compl. Ready to Prod. 12/27/90		Total Depth 5900'		P.B.T.D. 5747			
Elevations (DF, RKB, RT, GR, etc.) 6994 GR	Name of Producing Formation Lybrook Gallup		Top Oil/Gas Pay 5459		Tubing Depth 5589			
Perforations 5575-82, 5459, 61, 5620, 42, 45, 70, 82					Depth Casing Shoe 5847			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4	8 5/8		321		250			
7 7/8	4 1/2		5847		830			
N/A	2 3/8		5589		N/A			

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 12/27/90	Date of Test 12/27/90	Producing Method (Flow, pump, gas lift, etc.) pumping	
Length of Test 24	Tubing Pressure 100#	Casing Pressure 200#	Choke Size N/A
Actual Prod. During Test	Oil - Bbls. 32	Water - Bbls. 4	Gas - MCF 70

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature
Russell A. Chabaud, VP-Operations
Printed Name
Dec. 28, 1990
Date
713-537-9000
Telephone No.

OIL CON. DIV.,
OIL CONSERVATION DIVISION

Date Approved JAN 07 1991

By Original Signed by CHARLES SHOLSON

Title DEPUTY OIL & GAS INSPECTOR, DIST. #3

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.