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 1-1-29 See Instructions at Bottom of Page

7068

DISTRICT II
P.O. Drawer DD, Arteria, NIM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

DISTRICT III Santa Fe, New Mexico 87504-2088 1000 Rio Brazos Rd., Aziec, NM 87410											
I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS											
1 -						Well API No.					
Bannon Energy, In	·	30-045-24782									
3934 F.M. 1960 West, Suite 240, Houston, Texas 77068 Reason(s) for Filing (Check proper box) New Well Other (Please explain)											
Change in Transporter of:											
Character Country											
Change in Operator Casinghead Gas Condensate Change of address If change of operator give same and address of previous operator											
IL DESCRIPTION OF WELL AND LEASE											
1.	ral 25 Well No. Pool Name, Include Lybroo						d of Lease No. e, Federal or Fee NM 12233				
Unit LetterM	: 510 Feet From The south Line and 660.								west	233	
Section 25 Townshi	241							San Juan			
III. DESIGNATION OF TRANSPORTED OF OUR AND NATIONAL PROPERTY.											
	Address (Give address to which approved copy of this form is to be sent)										
Giant Refining Company Name of Authorized Transporter of Casinghead Gas (XX) or Dry Gas					P. U. Box 9156, Phoenix, AZ 85068						
Bannon Energy, Inc.				385	Address (Give address to which approved copy of this form is to be sent) 3934 F.M. 1960 West, Suite 240, Houston, TX.					ent)	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp	Rge.	Is gas actually	y connected?	When	, Suite 240, Houston, TX.			
	M 125 124N 9t/						•	4-16-81			
If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA 1985 4-16-81											
Designate Type of Completion	- m	Oil Well	G	as Well	New Well	Workover	Deepen	Plug Back S	ame Res'v	Diff Res'v	
Date Spudded	Date Comp	l. Ready to	Prod		Total Depth			<u> </u>		L	
								P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth			
Perforations								Depth Casing Shoe			
	G AND	CEMENTIN	NG RECORI)							
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
V. TEST DATA AND DECLIES	T FOR A	LLOW	D1 D								
V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must							11. 6. 41			·	
Date First New Oil Run To Tank	Gran mag	be equal to or exceed top allowable for this depth or be for full 24 hours.) Producing Method (Flow, pump, gas lift, etc.)									
Length of Test	Tubing Pressure				Casing Pressur		(0)	Shall sit.	WE	ra.	
Actual Prod. During Test	Oil - Bbls.				Water - Bbis.			Gas-MCF			
GAS WELL					· · · · · · · · · · · · · · · · · · ·			MAY221	990		
Actual Prod. Test - MCF/D	Length of To	est .			Bbls. Condens	ote A O JOP	01	L CON	DIV.		
					Dois. Coddegg	ale minich		Grande	ensate		
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
VL OPERATOR CERTIFICA	<u> </u>										
i hereby certify that the rules and require	0	IL CONS	SERVA	TION D	VISIO	N					
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						
101/11					Date .	Approved		11171 W K			
Signature W.J. Holcomb Agent					By Bin) Change						
Printed Name 5-18-90 718 537-9000 Title					SUPERVISOR DISTRICT #3						
Date Telephone No.							· · · · · · · · · · · · · · · · · · ·		<u> </u>		

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
- 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.

OIL CON. DIV.