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

State of New Mexico Energy, Minerals and Natural Resources Department

7068

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

## OIL CONSERVATION DIVISION P.O. Box 2088

| DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87               | 410                 | Sa  | inta Fe,     | New M           | lexico 875  | 04-2088  |                  |               |                |                                       |  |
|--|---------------------|---|--------------|-----------------|---|--|------------------|---------------|----------------|---------------------------------------|--|
| I.   | REQU                | EST F   | OR AL        | LOWA            | BLE AND   | AUTHOR   | ZATION           |               |                |                                       |  |
| Operator   |                     | O TRA   | NSPC         | ORT OIL         | AND NA  | TURAL G  | AS               |               |                |                                       |  |
| Bannon Energy, Inc.  |                     |   |              |                 | -   |  |                  | II API No.    |                |                                       |  |
| Address<br>3934 F.M. 1960 We                                 |                     | 30-045-   |              |                 |   | 20   |                  |               |                |                                       |  |
| Reason(s) for Filing (Check proper is                        | ex)                 | 240,H   | iousto       | n, Tex          |   |  |                  |               |                |                                       |  |
| New Well   | -                   | Change in   | Transpor     | ter of:         | XXI Out   | et (Please expl                                  | ain)             |               |                |                                       |  |
| Recompletion   | Oii                 | <b>XX</b>   | Dry Gas      |                 |   | ive 6-1-9  |                  |               |                |                                       |  |
| If change of operator give name                              | Casinghea           | Gas   | Conden       | nate 📗          | Chang   | ge of add  | lress            |               |                |                                       |  |
| and address of previous operator                             |                     |   |              |                 |   |  |                  |               |                |                                       |  |
| IL DESCRIPTION OF WE Lease Name                              | LL AND LEA          | SE  |              |                 |   |  |                  |               |                |                                       |  |
| South Blanco Fee   |                     | ng Formation  |              |                 | of Lease No.  |  |                  |               |                |                                       |  |
| Location   | ybroo               | k Gallup  |              | State           | Federal or Fe   | Federal or Fee NM 12233                          |                  |               |                |                                       |  |
| Unit LetterG   | :19                 | 000   | Feet From    | m The _n        | orth ,.   | and16  | 60               |               | 000            |                                       |  |
| Section 26 Ton   |                     | . /   |              |                 | LID   | and  | F                | eet From The  | east           | Line                                  |  |
|  |                     | 24N   | Range        | 8W              |   | мрм,   | San              | Juan          |                | County                                |  |
| III. DESIGNATION OF TR                                       | NATU                | JRAL GAS  |              |                 |   |  |                  |               |                |                                       |  |
| Name of Authorized Transporter of C<br>Giant Refining Con    |                     | Address (Give address to which approved copy of this form is to be acres) |              |                 |   |  |                  |               |                |                                       |  |
| Name of Authorized Transporter of C                          | is ( )              | 1. 0. box 9156, Phoemx, AZ 85068  |              |                 |   |  |                  |               |                |                                       |  |
| Bannon Energy, Inc.  |                     |   |              |                 | Address (Give address to which approved copy of this form is to be sent) 3934 F.M. 1960 West, Suite 240, Houston, TX. |  |                  |               |                |                                       |  |
| If well produces oil or liquids,<br>give location of tanks.  | Uncit   1           |   | Twp.         | Rge.            | is gas actually   | connected?                                       | When             | ?             | o, noust       | ou, ix.                               |  |
| f this production is commingled with V. COMPLETION DATA      | that from any othe  | 26  | 24N          | 8W<br>comminati | yes   |  | 1-2              | l <b>-</b> 82 |                |                                       |  |
| V. COMPLETION DATA   |                     |   |              |                 | and other million   | ·  | <del></del>      |               |                |                                       |  |
| Designate Type of Complet                                    | ion - (X)           | Oil Well  | Ga           | s Well          | New Well  | Workover   | Deepen           | Plug Back     | Same Res'v     | Diff Res'v                            |  |
| Date Spadded   | Date Compl          | Ready to  | Prod.        |                 | Total Depth   |  | <u> </u>         |               |                |                                       |  |
| Elevations (DF, RKB, RT, GR, etc.)                           |                     |   |              |                 | Top Oil/Gas Pay   |  |                  | P.B.T.D.      |                |                                       |  |
| •  | Name of Pro         | ducing Fo   | mation       |                 |   |  |                  | Tubing Depth  |                |                                       |  |
| erforations  | <del></del>         | <del></del>   |              |                 |   |  |                  | Dowl Casia    | - Ch           |                                       |  |
|  |                     |   | -            |                 |   |  |                  | Depth Casin   | g Stoc         |                                       |  |
| HOLE SIZE CASING & TUBING, CASING AND CASING & TUBING SIZE   |                     |   |              |                 |   |  |                  |               |                | <del></del>                           |  |
|  | <u> </u>            | CASING & TUBING SIZE  |              |                 |   | DEPTH SET  |                  |               | SACKS CEMENT   |                                       |  |
|  |                     |   |              |                 | <del></del>   |  |                  |               | <del></del>    | · · · · · · · · · · · · · · · · · · · |  |
|  |                     |   |              |                 |   |  |                  |               |                |                                       |  |
| . TEST DATA AND REQU   | EST FOR AL          | LOWA  | BLE          |                 |   |  |                  |               |                |                                       |  |
| IL WELL (Test must be aft<br>Date First New Oil Run To Tank  | er recovery of sola | l volume o  | f load oil   | and must b      | e equal to or o   | Esceed top allo                                  | wable for this   | denth on he G | 631 94 L       |                                       |  |
| ALE PUR NEW Oil Run To Tank                                  | Date of Ten         |   |              |                 | Producing Met   | hod (Flow, pur                                   | rp, gas lift, e  | (c.)          | y juli 24 Kole | 3.)                                   |  |
| ength of Test  | Tubing Press        | ure.  |              |                 | Casing Pressur  |  | TEN              |               |                |                                       |  |
| and Bad Dad To   |                     |   |              |                 |   | D)   |                  |               | IVE            | n                                     |  |
| ctual Prod. During Test                                      | Oil - Bbls.         |   |              |                 | Water - Bbis.   |  | <del>-1//-</del> | Gas- MCF      |                | <del>U</del>                          |  |
| GAS WELL   |                     | ·····   |              |                 | · · · · · · · · · · · · · · · · · · ·   |  | - <del></del>    | MAY22         | 1990           |                                       |  |
| coul Prod. Test - MCF/D                                      | Length of Te        | <u> </u>  | <del></del>  |                 | Phis Condon   |  |                  | LCON          | LDIV           | 1                                     |  |
|  |                     |   |              |                 |   | Bbls. Condensate/MMCF  Casing Pressure (Shut-in) |                  |               | DIST. 3        |                                       |  |
| sting Method (pitot, back pr.)                               | Tubing Press        |   |              |                 |   |  |                  |               | Choke Size     |                                       |  |
| L OPERATOR CERTIF  | CATE OF C           | 101 m   | <u> </u>     |                 |   |  | ·                |               |                |                                       |  |
| I DETECTY CEPTIFY that the rules and re-                     | mulationa of the 🔿: |   |              | E               | 0   | IL CON   | SERVA            | TIONE         |                | A I                                   |  |
| TAILMENT THERE DOED COMPINED AND IN                          | nd that the infor-  |   | above        |                 |   | 12 0011  |                  | _             | _              | IN                                    |  |
| is true and complete to the best of my knowledge and belief. |                     |   |              |                 | Date ApprovedMAY 2 2 1990   |  |                  |               |                |                                       |  |
| WHOT   | comf                |   |              |                 |   | 11.500   |                  |               | Λ              |                                       |  |
| Signature W.J. Holcomb                                       |                     | 4   |              |                 | Ву  | <del></del>                                      |                  | <u> ۱۸</u>    | Harry !        |                                       |  |
| Printed Name   |                     | Age:  | n t<br>Title |                 |   |  | SUPE             | RVISOR        | DISTRICT       | 12                                    |  |
| 5-18-90 713  | 537-0000            | •   |              | 11              | Title   |  |                  |               |                | r 😕                                   |  |

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

713 537-9000

5-18-90

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance

Title

2) 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.

VG VOJ JO