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

State of New Mexico Energy, Minerals and Natural Resources Department D E C E

See Instructions
DEC1 1 1989

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

OIL CONSERVATION DIVISION

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

OIL CON. DIV

000 Rio Brazos Rd., Aztec, NM 87410	REQUEST FOR ALLOWARI F AND

DIST. 3 AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator Well API No. Bannon Energy, Inc. c/o Holcomb Oil & Gas, Inc. 30-045-07859 Address P.O. Box 2058, Farmington, NM 87499 Reason(s) for Filing (Check proper box) Other (Please explain) New Well Change in Transporter of: Dry Gas Effective April 1, 1989 Recompletion Oil XX Change in Operator If change of operator give name and address of previous operator LCS Company, Inc. PO Box 450, Alb., NM 87103-0450 II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Lease No. Kind of Lease Sullivan State, Federal of Fee Aztec Fruitland Location 1945 660 Feet From The West ___ Feet From The North Line and __ Unit Letter __ Section 25 Township 29N Range 11W , NMPM, San Juan 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 Name of Authorized Transporter of Casinghead Gas KX. or Dry Gas ____ Address (Give address to which approved copy of this form is to be sent)
PO Box 1492, El Paso, Texas 79978 El Paso Natural Gas Co. When? 3-12-56 If well produces oil or liquids, give location of tanks. Twp Unit Sec. Is gas actually connected? Rge. yes If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v Diff Res'v Designate Type of Completion - (X) Total Depth Date Spudded Date Compl. Ready to Prod. P.B.T.D. Top Oil/Gas Pay Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Tubing Depth Perforations Depth Casing Shoe TUBING, CASING AND CEMENTING RECORD **HOLE SIZE** CASING & TUBING SIZE SACKS CEMENT **DEPTH SET** 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 Producing Method (Flow, pump, gas lift, etc.) Date of Test Length of Test Casing Pressure Choke Size Tubing Pressure Gas- MCF Actual Prod. During Test Oil - Bbls. Water - Bbls. **GAS WELL** Actual Prod. Test - MCF/D Bbls. Condensate/MMCF Gravity of Condensate Length of Test Choke Size Casing Pressure (Shut-in) Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) VI. OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION 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. DEC 11 1989 Date Approved ____ 10ml 11 Signature W. J. Holcomb Agent SUPERVISOR DISTRICT #3 Printed Name Title

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

<u>12-8-89</u>

326-0550

- 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.

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