

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

DISTRIBUTION	5
SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRORATION OFFICE	

I.

Operator SUPRON ENERGY CORPORATION	
Address P.O. Box 808, Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Opened a new zone in an old well.
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jicarilla "E"	Well No. 7	Pool Name, Including Formation Blanco Mesaverde	Kind of Lease State, Federal or Fee Federal	Lease No. Con. 104
Location Unit Letter P ; 790 Feet From The South Line and 790 Feet From The East Line of Section 15 Township 26 N Range 4 W , 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 checked="" type="checkbox"/> Plateau, Inc.	Address (Give address to which approved copy of this form is to be sent) Box 108, Farmington, New Mexico 87401			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Gas Company of New Mexico	Address (Give address to which approved copy of this form is to be sent) 1st International Building - Dallas, Texas Attention: Mr. R.J. McCrary			
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 15	Twp. 26N	Rge. 4W
				Is gas actually connected? No When -----

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		XX		XX				XX
Date Spudded -----	Date Compl. Ready to Prod. 8-1-79		Total Depth 8044		P.B.T.D. 8010			
Elevations (DF, RKB, RT, GR, etc.) 6954 R.K.B.	Name of Producing Formation Mesaverde		Top Oil/Gas Pay 5726		Tubing Depth 5777			
Perforations 5726 - 5882					Depth Casing Shoe 8044			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
15"	10-3/4", 32.75#		337 ft. R.K.B.		250			
9-7/8"	7-5/8", 26.40#		3844 ft. R.K.B.		300 cu. ft.			
6-3/4"	5-1/2", (Liner)		3678 (top) 8044 (Bot.)		625 cu. ft.			
	1-1/2" E.U.E.		5777 R.K.B.					

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 Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 2129	Length of Test 3 hours	Bbls. Condensate/MMCF -----	Gravity of Condensate -----
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 1221	Casing Pressure (Shut-in) 1221	Choke Size 3/4"

I. CERTIFICATE OF COMPLIANCE

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

Kenneth E. Roddy

(Signature)

Production Superintendent

(Title)

August 10, 1979

(Date)

OIL CONSERVATION COMMISSION

APPROVED **AUG 23 1979**, 19

BY Original Signed by A. P. Kendrick

TITLE

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiple