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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

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

I. Operator
Sagron Energy Corporation
Address
P. O. Box 808, Farmington, New Mexico 87401
Reason for filing (Check proper box) Other (Please explain)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jicarilla "D"	Well No. 9	Pool Name, Including Formation Blanco Mesaverde	Kind of Lease Jicarilla Apache	Lease No. Contract No. 106
Location Unit Letter K ; 1835 Feet From The South Line and 1675 Feet From The West Line of Section 26 Township 26 North Range 4 West , 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"/> Platinum, Inc.	Address (Give address to which approved copy of this form is to be sent) Farmington, New Mexico 87401					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Gas Company of New Mexico	Address (Give address to which approved copy of this form is to be sent) 1st International Bldg., Suite 1800 Dallas, Texas 75201 Attn: Mr. R.J. McOrary					
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 26	Twp. 26N	Rge. 4W	Is gas actually connected? No	When Upon Pipeline Installation

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.
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudded 11/21/77	Date Compl. Ready to Prod. January 31, 1978		Total Depth 5900 Ft.		P.B.T.D. 5858			
Elevations (DF, RKB, RT, GR, etc.) 6950 Gr.	Name of Producing Formation Mesaverde		Top Oil/Gas Pay 5662		Tubing Depth 5642			
Perforations 1 Port @ 5662, 5664, 5666, 5668, 5670, 5713, 5714, 5715, 5716, 5717, 5718, 5719, 5720, 5721, 5722, 5723, 5724, 5725 & 5726 ft. R.K.B.					Depth Casing Shoe 5899 Ft.			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	9-5/8"		272 Ft.		295 cu. ft.			
8-3/4"	7"		3800 Ft.		175 cu. ft.			
6-1/4"	4-1/2"		5900 Ft.		375 cu. ft.			
	2-1/16"		5642 Ft.					

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 1110	Length of Test 3 hrs.	Bbls. Condensate/MMCF -0-	Gravity of Condensate -0-
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure (shut-in) 1205	Casing Pressure (shut-in) 1205	Choke Size 3/4"

VI. 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.

Original Signed By
Rudy D. Motte
Rudy D. Motte
Area Superintendent
(Signature)
(Title)
February 15, 1978
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY **Original Signed by A. R. 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 multiply completed wells.