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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

1.

Operator SUPRON ENERGY CORPORATION	
Address P. O. Box 808, Farmington, New Mexico 87401	
Reason: for filing (Check proper box)	Other (Please explain)
New Well: <input checked="" type="checkbox"/>	Change In Transporter of:
Recompletion: <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change In Ownership: <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 "G"	Well No. 2-R	Pool Name, including Formation Tapacito Pictured Cliffs	Kind of Lease Jicarilla Apache	Lease No. Contract No. 150
Location Unit Letter B ; 790 Feet From The North Line and 1450 Feet From The East				
Line of Section 1 Township 26N Range 5W , 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) 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 Bldg., Suite 1800 Dallas, Texas 75201 Attn: R. J. McGrary					
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 1	Twp. 26N	Rge. 5W	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 November 9, 1977	Date Compl. Ready to Prod. January 18, 1978		Total Depth 4249		P.B.T.D. 4220			
Elevations (DF, RKB, RT, GR, etc.), 7367 Gr.	Name of Producing Formation Pictured Cliffs		Top Oil/Gas Pay 4110		Tubing Depth 4134			
Perforations 1 Perf @ 4110, 4112, 4114, 4116, 4118, 4120, 4122, 4124, 4126, 4128, 4130, 4132, 4134, 4136 and 4138 ft. R.K.B.					Depth Casing Shoe 4248			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
9-7/8"	7-5/8"		325		115 Sx.			
6-3/4"	4-1/2"		4249		905 cu. ft.			
	1-1/4"		4134					

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)

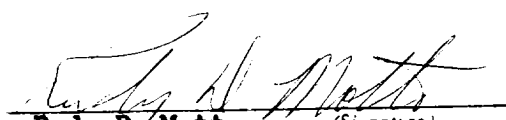
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 538	Length of Test 3 Hrs.	Bbls. Condensate/MMCF -0-	Gravity of Condensate -0-
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure (shut-in) 312	Casing Pressure (shut-in) 312	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.


Rudy D. Motto (Signature)
Area Superintendent (Title)
February 16, 1978 (Date)

OIL CONSERVATION COMMISSION

APPROVED **FEB 22 1978**, 19_____
Original Signed by A. R. Kendrick
BY _____
TITLE **SUPERVISOR DIST. 10**

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.