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U.S.G.S.		<u>L</u> _	<u> </u>	
LAND OFFICE				
TRANSPORTER	OIL	I		
	GAS		<u> </u>	
OPERATOR		1		
DOCE AT LOW OF FICE		i	1	

<u>January 18, 1980</u>

(Date)

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

	SANTA FE /	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65		
-	FILE /		AND	C 4 5		
}	U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	GAS		
-	LAND OFFICE					
	TRANSPORTER GAS /			_		
ŀ	OPERATOR /			30-039-22055		
1.	PROBATION OFFICE					
•	Operator					
	SUPRON ENERGY CORPOR	RATION				
ı	Adorest	naton. New Mexico 87401				
	P.O. EOX 808, Farmir Reason(s) or filing (Check proper					
	New Well	Change in Transporter cf:				
	Recompletion	OII Dry Go	as [
	Change in Ownership	Casinghead Gas Conde	nsate			
L						
]	If change of ownership give nam and address of previous owner _	e				
11.	DESCRIPTION OF WELL AN	Well No.; Pool Name, Including F	ormation Kind of Leas	Lease No.		
				olor Fee Federal Con No. 10		
	Jicarilla "B"	13 Bouch Branco	Trocured Gazzas,			
		Feet From The South Lin	ne and 870 Feet From	The West		
	Unit Letter 12 ,					
	Line of Section 36	Township 26 North Range	4 West , NMPM, Rio	Arriba County		
		The same and market of	4.6			
III.	DESIGNATION OF TRANSPORTER OF Authorized Transporter of	ORTER OF OIL AND NATURAL GA	AS Address (Give address to which appro	oved copy of this form is to be sent)		
	Nor e of Authorized Transporter of					
	Name of Authorized Transporter of	Casinghead Gas or Dry Gas X	Address (Give address to which appro	oved copy of this form is to be sent)		
	Gas Company of New 1		First International Backet Attention: Mr. R.J.	uilding, Dallas, Texas McCrary		
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	!s gas actually connected? Wi	nen		
	give location of tanks.	t 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No			
	If this production is commingled	with that from any other lease or pool,	give commingling order number:			
	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
	Designate Type of Compl	O	XX			
		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Date Spudded 10-4-79		6058	6027		
	Elevations (DF, RKB, RT, GR, etc.	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	7135 R.K.B.	Pictured Cliffs	3712	3787 Depth Casing Shoe		
	Perforations			6058		
	3712 3742 TUBING, CASING, AND CEMENTING RECORD					
		CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	HOLE SIZE	9-5/8", 32.30#	262	225 sx		
	13-3/4" 7-7/8"	5-1/2", 15.50#	6058	1st stage - 275 sx		
				2nd stage - 160 sx		
v	TEST DATA AND REQUEST	T FOR ALLOWABLE (Test must be able for this d	after recovery of total volume of load of	l and must be equal to or exceed top allow-		
٧.	OIL WELL	dote your time	Producing Method (Flow, pump, gas			
	Date First New Oil Run To Tanks	Date of Test	, reducing memory of	per and the second		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Length of . eat	• • • • • • • • • • • • • • • • • • • •				
	Actual Pred. During Test	Oil-Bbls.	Water-Bbis.	Gde-MCF		
				44221980		
				13.1 - 2.14 · /		
	GAS WELL		Bbls, Condensate/MMCF	Crayity of Condensate		
	Actual Fred. Test-MCF/D	Length of Test				
	245 Testing Mathod (pitot, back pr.)	3 hours Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
	Back Pressure	590	584	3/4"		
			OIL CONSERV	ATION COMMISSION		
VI.	CERTIFICATE OF COMPLI	RTIFICATE OF COMPLIANCE		FEB 2 0 1980 19		
	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 FRANK T. CHAVEZ			
	above is true and complete to	the pear of my knowledge and benefit	TITLE SUPERVISOR DISTRICT # 3			
		1/1				
		This form is to be filed in compliance with RULE 1104.				
	Kenneth E. Roddy	Jonneth C. Noday	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			
	Kenneth E. Roddy /	Signature)	well, this form must be accompanied by tests taken on the well in accordance with RULE 111.			
	Production Superint	endent /	All sections of this form to	All sections of this form must be filled out completely for allow able 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.