

NO. OF COPIES RECEIVED

DISTRIBUTION

SANTA FE

FILE

U.S.G.S.

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.

Effective 1-1-65

I. Operator

Supron Energy Corporation

Address

P.O. Box 808, Farmington, New Mexico 87401

Reason(s) for filing (Check proper box)

New Well ☒

Recompletion ☐

Change in Ownership ☐

Change in Transporter of:

Oil ☐

Casinghead Gas ☐

Dry Gas ☐

Condensate ☐

Other (Please explain)

Oper name change from

Hill - Stewart

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name

Newsom "B"

Well No.

17

Pool Name, Including Formation

Ballard Pictured Cliffs

Kind of Lease

State, Federal or Fee

Federal

Lease No.

SF078384

Location

Unit Letter

D

925

Feet From The

North

Line and

1005

Feet From The

West

Line of Section

8

Township

26 North

Range

8 West

NMPM,

San Juan

County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐

Address (Give address to which approved copy of this form is to be sent)

Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐

Address (Give address to which approved copy of this form is to be sent)

1st International Bldg., Dallas, Texas

Attention: Mr. R. J. McGrary

If well produces oil or liquids, give location of tanks.

Unit

D

Sec.

8

Twp.

26N

Rge.

8W

Is gas actually connected?

No

When

In Progress

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion - (X)

Oil Well

Gas Well

XX

New Well

XX

Workover

Deepen

Plug Back

Same Res'v.

Diff. Res'v.

Date Spudded

12-17-79

Date Compl. Ready to Prod.

1-25-80

Total Depth

2260

Elevations (DF, RKB, RT, GR, etc.)

6268 GR

Name of Producing Formation

Pictured Cliffs

Top Oil/Gas Pay

2064

Tubing Depth

No. Tubing

Perforations

13 Size 0.33" at

2064,2065,2066,2067,2072,2074,2076,2084,2086,2123,2124 and 2125

Depth Casing Shoe

2410

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE

CASING & TUBING SIZE

DEPTH SET

SACKS CEMENT

9-7/8"

7-5/8"

219'

214 Sx.

6-3/4

2-7/8

2299'

250 Sx.

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.

Gals-MCF

GAS WELL

Actual Prod. Test-MCF/D

Length of Test

Bbls. Condensate/MMCF

Gravity of Condensate

581

3 Hours

-0-

-0-

Testing Method (pilot, back pr.)

Tubing Pressure (Shut-in)

Casing Pressure (Shut-in)

Choke Size

Back Pressure

NA

526 PSIG

3/4"

CERTIFICATE OF COMPLIANCE

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

Area Superintendent

June 13, 1980

OIL CONSERVATION COMMISSION

APPROVED

JUN 16 1980

19

BY

Original Signed by FRANK T. CHAVEZ

TITLE

SUPERVISOR DISTRICT 7

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.