

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-1-78

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. PRODUCTION OFFICE

Operator
Supron Energy Corp. c/o John H. Hill, et al.

Address
Kysar Building, Suite 020
300 W. Arrington, Farmington, New Mexico 87401

Reason(s) for filing (Check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:		Other (Please explain)	
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 Hodges	Well No. 21	Pool Name, Including Formation Ballard Pictured Cliffs	Kind of Lease State, Federal or Fee Federal	Lease No. SF-078432
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Location

Unit Letter A ; 1265 Feet From The North Line and 940 Feet From The East

Line of Section 34 Township 26 North Range 8 West , NMPM, San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Gas Company of New Mexico	1st. International Building, Dallas, Texas Attention: Mr. R. J. McCrary 75270
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
	No

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.
		(X)	(X)					
Date Spudded 10/15/80	Date Compl. Ready to Prod. 12-16-80	Total Depth 2500	P.B.T.D. 2491					
Elevations (D ₁ , RT, GR, etc.) 6686' GR	Name of Producing Formation Pictured Cliffs	Top Oil/Gas Pay 2388	Tubing Depth N/A					
Perforations 2396 - 2400, 04, 08, 12, 28, 30, 32, 34, 36, 38, 54, 58, 58, 62.			Depth Casing Shoe 2500'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
10 3/4"	7" - 17#	218'	150 sx. Class B - 2% CaC
6 1/4"	2 7/8" - 6.4#	2491'	550 sx. Class B - 2% Gel

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 712	Length of Test 3 hrs	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (shut-in)	Casing Pressure (shut-in) 532	Choke Size 3/4

VI. CERTIFICATE OF COMPLIANCE

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

John H. Hill for John H. Hill, et al
on behalf of and agent for Supron Energy Corp.
Exploration and Producing Manager

January 16, 1980
(Date)

OIL CONSERVATION DIVISION
JAN 23 1981

APPROVED _____, 19____
BY Original Signed by FRANK T. CHAVEZ
SUPERVISOR DISTRICT # 3

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.