

QAL-30-045-23531

| | |
|--|---|
| Operator | |
| SUPRON ENERGY CORPORATION | |
| Address | |
| P.O. Box 808, Farmington, New Mexico 87401 | |
| Reason(s) 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 | | Well No. | Pool Name, Including Formation | Kind of Lease | Lease No. |
|---|--|----------|--------------------------------|-----------------------------|-----------|
| Wright Com. | | 1-R | Aztec Pictured Cliffs | State, Federal or Fee State | E-9053 |
| Location | | | | | |
| Unit Letter <u>M</u> ; <u>790</u> Feet From The <u>South</u> Line and <u>1190</u> Feet From The <u>West</u> | | | | | |
| Line of Section <u>16</u> Township <u>28 North</u> Range <u>9 West</u> , NMPM, <u>San Juan</u> County | | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATUEAL 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) | |
| Southern Union Gathering Company | | | | | First International Building, Dallas, Texas Attention: Mr. R.J. McCrary | |
| If well produces oil or liquids, give location of tanks. | Unit | Sec. | Twp. | Rge. | 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

| COMPLETION DATA | | | | | | | | | |
|---|----------------------|--|----------|-------------------------|----------|---------------------------|-----------|-------------|--------------|
| Designate Type of Completion - (X) | | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| Date Spudded 8-7-79 | | Date Compl. Ready to Prod. 9-17-79 | | Total Depth 2642 | | P.B.T.D. 2581 | | | |
| Elevations (DF, RKB, RT, GR, etc.) 6282 R.K.B. | | Name of Producing Formation Pictured Cliffs | | Top Oil/Gas Pay 2546 | | Tubing Depth No Tubing | | | |
| Perforations 2546 - 2576 | | | | | | Depth Casing Shoe 2612 | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | | DEPTH SET | | SACKS CEMENT | | | |
| 9-7/8" | 7-5/8", 20.00# | | | 208 | | 140 | | | |
| 6-3/4" | 2-7/8", 6.50# | | | 2612 | | 175 | | | |
| | | | | | | | | | |
| | | | | | | | | | |

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)

| OIL WELL | | | |
|---------------------------------|-----------------|---|------------|
| 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 | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| 1059 | 3 hours | ----- | ----- |
| Testing Method (pitot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |
| Back Pressure | ----- | 506 | 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.

Kenneth E. Roddy

Kenneth E. Roddy

(Signature)

Production Superintendent

(Title)

September 24, 1979

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19

BY _____ Original Signed by A. B. [illegible]

TITLE _____ SUPERVISOR DISTRICT # 3

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 or 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.

Concrete Forms C-104 must be filed for each pool in multiple