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NEW MEXICO OIL CONSERVATION COMMISSION Form C-104 REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-110 Effective 1-1-65 AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator SUPRON ENERGY CORPORATION Addres P.O. Box 808, Farmington, New Mexico 87401 Reason(s) for filing (Check proper box) Other (Please explain) New Well XChange in Transporter of: Oil Recompletion Dry Gas Change in Ownership Condensate If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease Lease No. State, Federa, or Fee 1-A Aztec Pictured Cliffs Largo Federal Federal NM0555563 Location 1190 Feet From The <u>NOTED</u> Line and <u>1595</u> __ Feet From The ___*West* 29 North Range 9 West 34 Township , NMPM, Sar Juan County Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas X Address (Give address to which approved copy of this form is to be sent)
First International Blcg., Dallas, Texas Attention: Mr. R.J. McCrary
Is gas actually connected? When Southern Union Gathering Company Twp. Pae. If well produces oil or liquids, give location of tanks. No If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Workover Plug Back | Same Res'v. Diff. Res'v. Oil Well Gcs Well New Well Deepen Designate Type of Completion - (X) XXTotal Depth P.B.T.D. 7-24-79 10-8-79 4768 <u>4734</u> Elevations (DF, RKB, RT, GR, etc.) Tubing Depth Name of Producing Formation Top Oil/Gas Pay 5799 ft. R.K.B. Pictured Cliffs 2168 2238 Perforations 4768 2168 - 2216 TUBING, CASING, AND CEMENTING RECORD DEPTH SET SACKS CEMENT CASING & TUBING SIZE HOLE SIZE 12-1/4" 266 150 9-5/8", 32.30#, H-40 8-3/4" 7" , 23.00#, K-55 2550 200 6-1/4" 4-1/2" , 10.50#, K-55 2414-4768 350 1-1/4", 2.30#, IJ 2238 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 Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Choke Size Tubing Pressure Casing Pressure Length of Test Gas - MCF Oil-Bble. Water - Bbla. Actual Prod. During Test **GAS WELL** Gravity of Condensate Actual Prod. Test-MCF/D Length of Test Bbis. Condensate/MMCF 961 3 hours Casing Pressure (Shut-in) Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) 755 3/4" Back Pressure <u> 755</u> OIL CONSERVATION COMMISSION VI. CERTIFICATE OF COMPLIANCE 1-4-80 APPROVED Original Signso I hereby certify that the rules and regulations of the Oil Conservation CHAVEZ Commission have been complied with and that the information given above is true and complete to the pest of my knowledge and belief. TITLE ____ Genneth E. 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. Kenneth E. Roddy (Signature) All sections of this form must be filled out completely for allowable on new and recompleted wells. Production Superintendent (Title) 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. October 11, 1979 (Date)

Separate Forms C-104 must be filed for each pool in multiply

completed wells.