

✓

OIL CONSERVATION COMMISSION
AZTEC DISTRICT

OIL CONSERVATION COMMISSION
BOX 2088
SANTA FE, NEW MEXICO

DATE 10/10/79
RE: Proposed MC XXX
Proposed DHC
Proposed NSL
Proposed SWD
Proposed WFX
Proposed PMX

Carl Ulvog

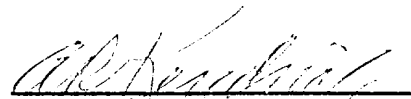
Gentlemen:

I have examined the application dated 10/3/79
for the Supron Energy Corporation Albright #2-J E-22-29N-10W
Operator Lease and Well No. Unit, S-T-R

and my recommendations are as follows:

Approve _____

Yours very truly,


A. R. Kendrick

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO
APPLICATION FOR MULTIPLE COMPLETION

Form C-107
5-1-61

Operator SUPRON ENERGY CORPORATION		County SAN JUAN		Date 10-2-79
Address P.O. Box 808, Farmington, New Mexico		Lease ALBRIGHT		Well No. 2-J
Location of Well E	Unit 22	Section 29 North	Township 10 West	Range

1. Has the New Mexico Oil Conservation Commission heretofore authorized the multiple completion of a well in these same pools or in the same zones within one mile of the subject well? YES _____ NO XX
2. If answer is yes, identify one such instance: Order No. _____ ; Operator Lease, and Well No.: _____

3. The following facts are submitted:	Upper Zone	Intermediate Zone	Lower Zone
a. Name of Pool and Formation	Pictured Cliffs		Chacra
b. Top and Bottom of Pay Section (Perforations)	2006 - 2038		3072 - 3082
c. Type of production (Oil or Gas)	Gas		Gas
d. Method of Production (Flowing or Artificial Lift)	Flow		Flow

4. The following are attached. (Please check YES or NO)

Yes	No	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	a. Diagrammatic Sketch of the Multiple Completion, showing all casing strings, including diameters and setting depths, centralizers and/or turbolizers and location thereof, quantities used and top of cement, perforated intervals, tubing strings, including diameters and setting depth, location and type of packers and side door chokes, and such other information as may be pertinent.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	b. Plat showing the location of all wells on applicant's lease, all offset wells on offset leases, and the names and addresses of operators of all leases offsetting applicant's lease.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	c. Waivers consenting to such multiple completion from each offset operator, or in lieu thereof, evidence that said offset operators have been furnished copies of the application.*
<input checked="" type="checkbox"/>	<input type="checkbox"/>	d. Electrical log of the well or other acceptable log with tops and bottoms of producing zones and intervals of perforation indicated thereon. (If such log is not available at the time application is filed it shall be submitted as provided by Rule 112-A.)

5. List all offset operators to the lease on which this well is located together with their correct mailing address.

Southland Royalty Company, P.O. Drawer 570, Farmington, New Mexico 87401

El Paso Natural Gas Company, P.O. Box 990, Farmington, New Mexico 87401

Amoco Production Company, 501 Airport Drive, Farmington, New Mexico 87401

ARCO Oil & Gas Company (Atlantic Richfield), 501 Lincoln Tower Bldg., 1860 Lincoln St., Denver, Colorado 80295

6. Were all operators listed in Item 5 above notified and furnished a copy of this application? YES X NO _____. If answer is yes, give date of such notification **July 6 & 9, 1979**.

CERTIFICATE: I, the undersigned, state that I am the Production Superintendent of the Supron Energy Corporation (company), and that I am authorized by said company to make this report; and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the best of my knowledge.

Kenneth E. Roddy
Kenneth E. Roddy Signature

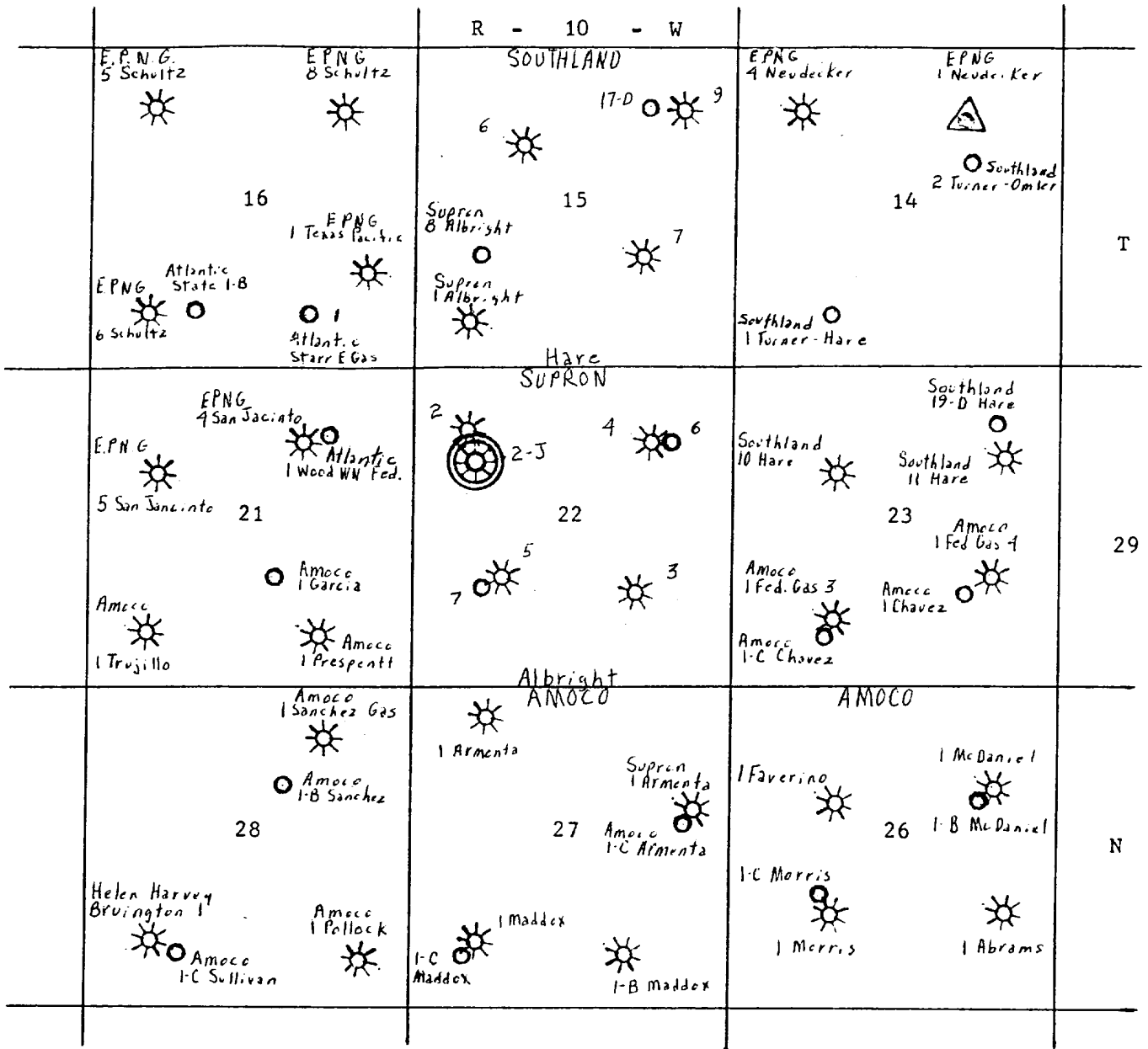
*Should waivers from all offset operators not accompany an application for administrative approval, the New Mexico Oil Conservation Commission will hold the application for a period of twenty (20) days from date of receipt by the Commission's Santa Fe office. If, after said twenty-day period, no protest nor request for hearing is received by the Santa Fe office, the application will then be processed.

NOTE: If the proposed multiple completion will result in an unorthodox well location and/or a non-standard proration unit in one or more of the producing zones, then separate application for approval of the same should be filed simultaneously with this application.

SUPRON ENERGY CORPORATION

WELL: ALBRIGHT NO. 2-J

LOCATION: 1470 Feet from the North line and 850 feet from the West line; Sec. 22, Twp. 29 North, Rge. 10 West, N.M.P.M., San Juan County, New Mexico.



Proposed Dual Chacra Ext. and Pictured Cliffs



Mesaverde



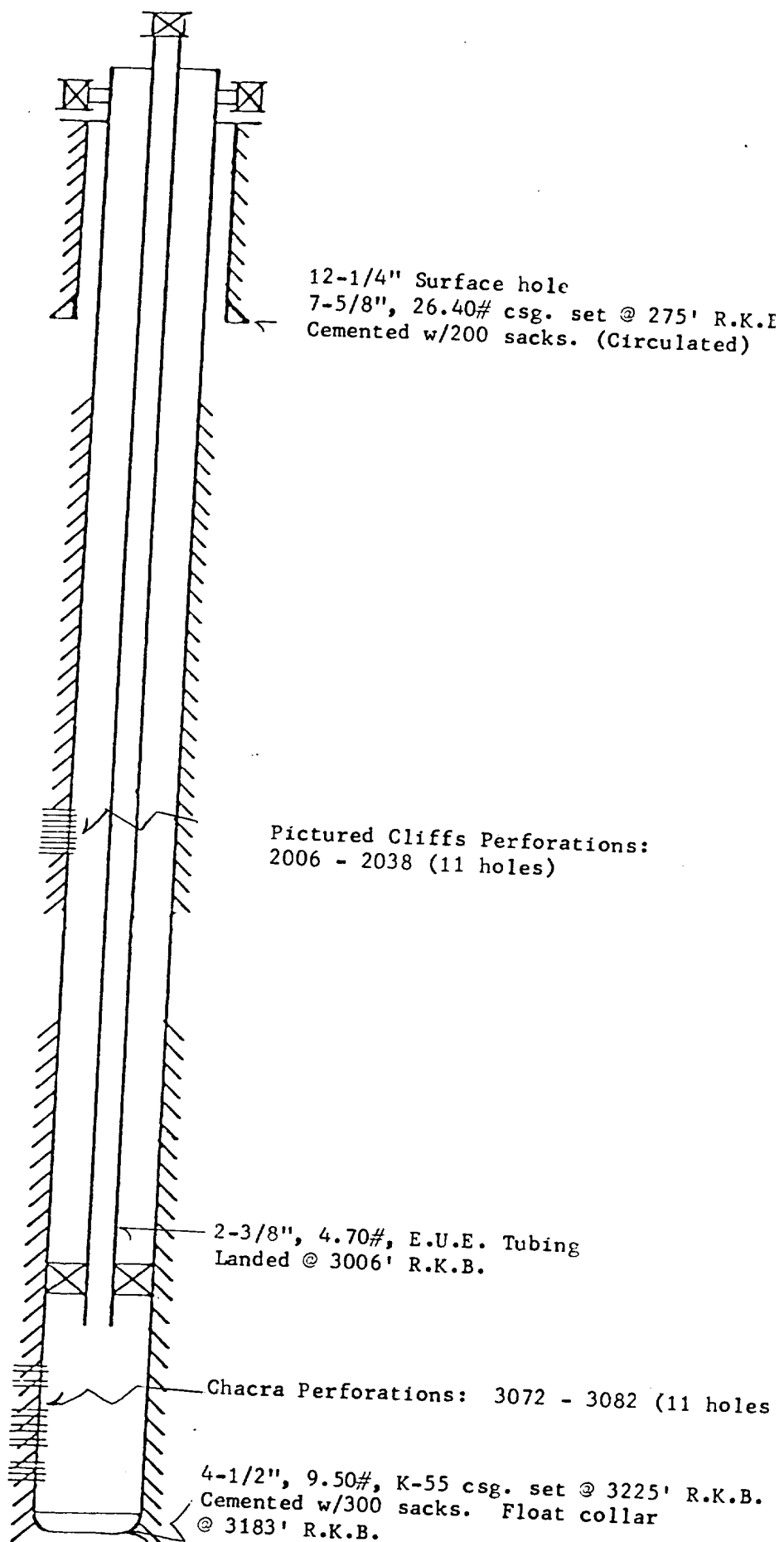
Pictured Cliffs



Dakota

Supron Energy Corporation

Albright No. 2-J
Sec. 22, T-29N, R-10W
San Juan County, N.M.



SANTA FE, NEW MEXICO
PACKER-SETTING AFFIDAVIT
(Dual Completion)

STATE OF New Mexico)
)
COUNTY OF San Juan)

Marvin Kruschke, being first dully sworn according to law,
upon his oath deposes and says:

That he is of lawful age and has full knowledge of the facts herein below set out.

That he is employed by Baker Packers in the capacity
of District Saleman and as such as its authorized agent.

That on September 14, 1979, he personally supervised the setting
of a Model "R" Packer in Supron Energy Corporation
(Make and Type of Packer) (Operator)

Albright Well No. 2-J, located in Unit Letter
E, Section 22, Township 29 North, Range 10 West, N.M.P.M.,
San Juan County, New Mexico.

That said packer was set at a subsurface depth of 3006 feet, said
depth measurement having been furnished by BlueJet.

That the purpose of setting this packer was to effect a seal in the annular space
between the two strings of pipe where the packer was set so as to prevent the commingling,
within the well-bore, of fluids produced from a stratum below the packer with fluids
produced from a stratum above the packer. That this packer was properly set and that it
did, when set, effectively and absolutely seal off the annular space between the two
strings of pipe where it was set in such manner as to prevent any movement of fluids
across the packer.

Baker Packers

Company

Marvin Kruschke
Its Agent

Subscribed and sworn to before me this the 4th day of October, AD, 1979.

Betty G. Stewart
Notary Public

My Commission Expires: August 25, 1980

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> Other _____				5. LEASE DESIGNATION AND SERIAL NO. SF 077865	
b. TYPE OF COMPLETION: NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> Other _____				6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR SUPRON ENERGY CORPORATION				7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P.O. Box 808, Farmington, New Mexico 87401				8. FARM OR LEASE NAME Albright	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1470'/North; 850'/West Line At top prod. interval reported below Same as above At total depth Same as above				9. WELL NO. 2-J	
14. PERMIT NO.				DATE ISSUED	
15. DATE SPUDDED 7/10/79				16. DATE T.D. REACHED 7/16/79	
17. DATE COMPL. (Ready to prod.) 9/23/79				18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 5658 R.K.B.	
19. ELEV. CASINGHEAD 5649				10. FIELD AND POOL, OR WILDCAT Bloomfield Chacra Extensio	
20. TOTAL DEPTH, MD & TVD 3225 MD & TVD				11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 22, T-29N, R-10W N.M.P.M.	
21. PLUG, BACK T.D., MD & TVD 3183 MD & TVD				12. COUNTY OR PARISH San Juan	
22. IF MULTIPLE COMPL., HOW MANY* 2				13. STATE New Mexico	
23. INTERVALS DRILLED BY 0 - 3225				19. ELEV. CASINGHEAD 5649	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3072 - 3082				25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN Induction - Electric, Gamma - Ray Density				27. WAS WELL CORED No	
28. CASING RECORD (Report all strings set in well)					
CASING SIZE		WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD
7-5/8"		26.40	275	12-1/4"	200 Sx.
4-1/2"		9/50	3225	6-3/4"	300 Sx.
29. LINER RECORD					
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	
30. TUBING RECORD					
SIZE	DEPTH SET (MD)	PACKER SET (MD)			
2-3/8"	3006	3006			
31. PERFORATION RECORD (Interval, size and number) 11 - 0.42" holes 3072 - 3082					
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
3072 - 3082		6500 Gal. 2% KCL water, 351,300 SCF of Nitrogen, 30,000 lb. 20-40 sand. 500 gal of 7-1/2% HCL			
33. PRODUCTION					
DATE FIRST PRODUCTION		METHOD (Flowing, gas lift, pumping—size and type of pump)			WELL STATUS (Producing or shut-in) Shut - In
DATE OF TEST		HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	
9/23/79		3	3/4"		
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF	WATER—BBL.
146				1924	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented					
35. LIST OF ATTACHMENTS					
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records					
SIGNED Kenneth E. Roddy		TITLE Production Superintendent		DATE 10-3-79	

*(See Instructions and Spaces for Additional Data on Reverse Side)

NMO

NO. OF COPIES RECEIVED		5
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	1
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-111
Effective 1-1-65

API 30-045-23564

I. 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.
Albright	2-J	Bloomfield Chacra Extension	State, Federal or Fee Federal	SF077865
Location				
Unit Letter	E	1470 Feet From The North Line and 850 Feet From The West		
Line of Section	22	Township 29 North Range 10 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)	
Southern Union Gathering Company	First International Bldg., 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

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		XX	XX					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
7/10/79	9/23/79	3225	3183					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
5658 R.K.B.	Chacra Extension	3072	3006					
Perforations						Depth Casing Shoe		
3072 - 3082						3225		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	7-5/8", 26.40#		275		200			
6-3/4"	4-1/2", 9.50#		3225		300			
	2-3/8", 4.70#, E.U.E.		3006					

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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
1921	3 Hours		
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size
Back Pressure	992	- - -	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)

October 3, 1979

(Date)

OIL CONSERVATION COMMISSION

APPROVED OCT 5 1979, 19
BY Original Signed by A. R. Kendrick
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.

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
				Base Ojo Alamo	1415	1415
				Top of P.C.	1964	1964
				Top of Chacra	2638	2638