	NO. OF COPIES RECEIV	15							
	DISTRIBUTION		\Box		NE	W MEXIC	~~		
	SANTA FE		1 - 1		IVE		EQU		
	FILE		$\dagger \exists$			N.L	. W		
	U.S.G.S.		+	ALIT	HORIZ	ATION	τ/		
	LAND OFFICE		+	AUI	HURIZ	ATION	1		
	TRANSPORTER C	OIL /							
	OPERATOR	'^ ` /-	+						
		1'	+						
1.	PRORATION OFFIC		ــــــــــــــــــــــــــــــــــــــ						
	1 '		ממעת.	m T (NI					
	SUPRON ENERGY CORPORATION								
	1	_					_		
	P.O. Box 80	8, Far	mıng	ton, No	ew Mex	(1CO	3		
	Reason(s) for filing (Ch	eck proper T	r DOX)	6 1			,		
	New We!!	-		•	in Tran	sporter o	1:		
	Recompletion	1		011					
	Change in Ownership	<u> </u>		Casing	head Gas	<u> </u>			
	If also a famous solice								
	If change of ownership and address of previous								
	•								
II.	DESCRIPTION OF	WELL A	ND L	EASE					
	Lease Name			Well N	o. Pool				
	Wright State	Com.		1-A	B	lanco	Me		
	Location			······					
	Unit Letter P	;	805	Feet F	rom The	Sou	ıt.		
	Line of Section	36	Town	shin	32 Nai	<i>th</i> R	ana		
	Line of Section	<u> </u>			2 2,02				
111.	Name of Authorized Tra Plateau, Inc.	nsporter o	f O11 [or	Condens	sate [X]			
	Name of Authorized Transporter of Casinghead Gas or Dry Gas X								
	Southern Unio	n Gath	erin	g Compa	ec.	Twp.	Т-Б-		
	If well produces oil or l	iquids,					1		
	give location of tanks.			P	36 j	32N	<u></u>		
IV.	If this production is co COMPLETION DAT		d with						
	Designate Type	of Compl	etion		Oil Wel	i Go	is W		
	Designate Type				<u></u>		X		
	Date Spudded			Date Compl	. Ready t	o Prod.			
	8-13-79 Elevations (DF, RKB, RT, G)				10-2	? - 79			
			c., 1	ormation	1				
	5793 R.K.	B_{\bullet}		Mesav	verde				
	Perforations								
	4450 - 471	6							
	TUBING, CASING								
	HOLE SIZ	F		CASIN	IG & TL				
	12-1/4"		-+	7-5/8					
	6-3/4"			4-1/2					
	6-3/4"			2-3/8			F		
			- -	2-3/8	, 4.	, , ,	L •		
v.	TEST DATA AND REQUEST FOR ALLOWABLE (Test mus								
į	OIL WELL Date First New Oil Run	ľ	Date of Tes	t					
	2212 / 2121 /1037 021 / 1011								
	Length of Test		-	Tubing Pres	sure				
			- 1						

(Date)

OIL CONSERVATION COMMISSION UEST FOR ALLOWABLE AND

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS													
	LAND OFFICE												
	TRANSPORTER OIL GAS	TRANSPORTER											
	OPERATOR /						Al	1 30-045	-23540				
1.	PRORATION OFFICE 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	Change in Transpo	orter of:	3 (1)									
	Recompletion	Gas 🔲											
	Change in Ownership		Casinghead Gas	Conde	ensate								
	If change of ownership give na and address of previous owner												
H.	DESCRIPTION OF WELL A	ND L	EASE				Vied of Logo			· · · · · · · · · · · · · · · · · · ·			
	Lease Name	Lease Name Well No. Pool Name, Including F					Kind of Leas State, Federa	e ilorFee S	tate B-	11124-24			
	Wright State Com. 1-A Blanco Mesa				Cluc	1							
	Unit Letter P;	805	Feet From The	South_Li	ine and	990	_ Feet From	The <u>Eas</u>	<u>t</u>				
	Line of Section 36	Town	ship 32 North	h Range	13 West	, NMPM,	Sar	Juan		County			
	DESIGNATION OF TRANSP	ОРТІ	CP OF OU AND N	ATURAL G	AS								
III.	Name of Authorized Transporter of	f Oil [or Condensate	• X	Address (Gi	ve address to	which appro	ved copy of th	is form is to	be sent)			
	Plateau, Inc.				P.O. Box 108, Farmington, New Mexico 87401								
	Name of Authorized Transporter o			ory Gas X	First 1	Internat	to which approved copy of this form is to be sent) ational Building, Dallas, Texas			Texas			
	Southern Union Gath		ng Company Unit Sec. Tw	vp. P.ge.	Attention: Mr. R.J.			McCrary //hen					
	If well produces oil or liquids, give location of tanks.	1		32N ! 13W	Λ	10	i						
	If this production is commingle	d with			give commin	gling order	number:						
IV.	COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res*	v. Diff. Resev			
	Designate Type of Comp.			XX	XX		1	P.B.T.D.	(
	Date Spudded	1	Date Compl. Ready to F		Total Depth	270		P.B.1.D.	4824				
	8-13-79 Elevations (DF, RKB, RT, GR, et	c 1	10-2- Name of Producing Form		Top Oil/Gas	370 Pay		Tubing Dept					
	5793 R.K.B.	_			4450			4592					
	Perforations								Depth Casing Shoe				
	4450 - 4716		TURING	CEMENTING RECORD									
	HOLE SIZE CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT					
	12-1/4"	-+	7-5/8", 26.4			306			190				
	6-3/4"		4-1/2", 9.5			4865		<u> </u>	375 (2	stage)			
			2-3/8", 4.7	O#, E.U.E	7	4592							
į				Test must be a	<u> </u>		a of load oil	and must be se		ceed top allow			
	TEST DATA AND REQUEST OIL WELL	r FOI	(ALLOWABLE (able for this di	epth or be for fi	ull 24 hours)							
i	Date First New Cil Run To Tanks	Producing Method (Flow, pump, gas lift, etc.)											
			Tubing Pressure		Casing Pressure			Choke Size					
	Length of Test		. uping Pressure				. 1	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\					
ŀ	Actual Prod. During Test	-	Oll-Bbls.		Water - Bbls.			Gen-MCF					
					·1 								
٢	Actual Prod. Test-MCF/D	L	ength of Test		Bbls. Conde		- idease	Gravity of C	ondensate				
	2665		3 hours				· And Said Street,						
Ī	Testing Method (pitot, back pr.)	T	Tubing Pressure (Shut-	-in)	Casing Press	-	ln)	Choke Size	2//11				
L	Back Pressure		935		 	935		TION COM	3/4"				
VI. •	CERTIFICATE OF COMPLI	ANCE	<u>C</u>										
	I hereby certify that the rules a	nd sea	culations of the Oil (Conservation	APPROV	ED	<u> ၂</u>	5 1	<u>9/9</u> , 1	9			
	Commission have been compli-	ed with	h and that the infor	mation given	11		l Signed	by A. B.	- Mendarika 	~ ` <u>`</u>			
(above is true and complete to	the b	est of my knowledge	e and belief.	BY		SUPERVISOR I						
							TITLE SUPLINISUE !-						
		Kenneth E. Roddy Kanneth E. Kodall					This form is to be filed in compliance with RULE 1104.						
_	Kenneth E. Roddy	14/	melly C.	If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviation of the d				[Ue Gealerton					
-	(Signature) Production Superintendent				tests taken on the well in accordance with RULE !!!.								
-	Production Superint							All sections of this form must be filled out completely for allowable on new and recompleted wells.					
	October 3, 1979					Fill out only Sections I, II, III, and VI for changes of owner,							

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.