

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.G.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
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)	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 _____

I. DESCRIPTION OF WELL AND LEASE

Lease Name USA	Well No. 1	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee Federal	Lease No. SF-078818A
Location				
Unit Letter <u>P</u> ; <u>812</u> Feet From The <u>South</u> Line and <u>804</u> Feet From The <u>East</u>				
Line of Section <u>24</u> Township <u>32 North</u> Range <u>13 West</u> , NMPM, <u>San Juan</u> County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Plateau Oil Company	P.O. Box 108 Farmington, New Mexico 87401
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
Unit <u>P</u> Sec. <u>24</u> Twp. <u>32N</u> Rge. <u>13W</u>	No

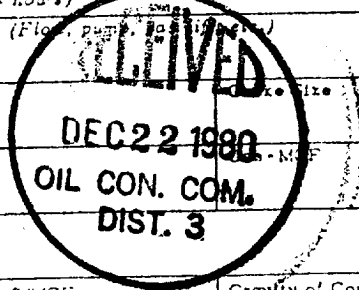
If this production is commingled with that from any other lease or pool, give commingling order number: _____

V. 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 6/20/80	Date Compl. Ready to Prod. 12-11-80		Total Depth 7000' MD		P.B.T.D. 6970' MD			
Elevations (DT, RT, GR, etc.) 5925' GR	Name of Producing Formation Dakota		Top Oil/Gas Pay 6814'		Tubing Depth 6792'			
Perforations 6814, 19, 25, 90, 92 - 6902, 04, 14, 19, 23, 33, 37, 40, 62, 70					Depth Casing Shoe 6995'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		312'		225 sx. Class B			
7 7/8"	4 1/2"		6995'		1645 sx. Class B			
	2 3/8"		6792'					

VI. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of lead 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, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.



GAS WELL			
Actual Prod. Test-MCF/D 769	Length of Test 3 hours	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) (1681 SI) 54 FTP	Casing Pressure (Shut-in)	Choke Size .75

VII. 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.

for John H. Hill, et al
on behalf of and agent for Supron Energy Corp.
Exploration and Producing Manager12-11-80
(Date)

OIL CONSERVATION DIVISION DEC 29 1980	
APPROVED	19
Original Signed by FRANK T. CHAVEZ	
BY SUPERVISOR DISTRICT # 3	
TITLE	

This form is to be filed in compliance with RULE 110A.

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 change of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-103 must be filed for each pool in multiple completed wells.