

NO. OF COPIES RECEIVED	5
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
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-110
Effective 1-1-65

BIC

API 30-043-20326

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

Lease Name Jicarilla "O"	Well No. 1	Pool Name, Including Formation Chacon Dakota Extension	Kind of Lease State, Federal or Fee Federal	Lease No. Cont. 417
Location Unit Letter M ; 790 Feet From The South Line and 790 Feet From The West				
Line of Section 10 Township 22 North Range 3 West , NMPM, Sandoval County				

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Plateau, Inc.		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"/> Gas Company of New Mexico		Address (Give address to which approved copy of this form is to be sent) 1st International Bldg., Dallas, Texas Attn: Mr. R. J. McGrary		
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 10	Twp. 22N	Pge. 3W
		Is gas actually connected? No		When Upon installation of Pipeline Facility

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

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
				X					
Date Spudded 11/19/78	Date Compl. Ready to Prod. 4/1/79	Total Depth 7055		P.B.T.D. 6860					
Elevations (DF, RKB, RT, GR, etc.) 7085 Gr.	Name of Producing Formation Dakota	Top Oil/Gas Pay 6632		Tubing Depth 6776					
Perforations				Depth Casing Shoe 7055					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT					
12-1/4"	8-5/8"	274		175					
7-7/8"	5-1/2"	7055		364					
	2-3/8"	6776							

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 4/1/79	Date of Test 4/11/79	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure 250 PSIG	Casing Pressure 50 PSIG	Choke Size 0.125"
Actual Prod. During Test	Oil - Bbls. 20	Water - Bbls. 7	Gas - MCF

GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION APR 19 1979	
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.		APPROVED _____, 19 _____	
Rudy D. Motto (Signature) Area Superintendent (Title) April 12, 1979 (Date)		BY Original Signed by A. R. Kendrick TITLE SUPERVISOR	
		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.	