

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

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DISTRIBUTION	
SANTA FE	
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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PROMOTION OFFICE	

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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"/>
Recompletion	<input type="checkbox"/>
Change In Ownership	<input type="checkbox"/>

Change in Transporter of:			
Oil	<input type="checkbox"/>	Dry Gas	<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

DESCRIPTION OF WELL AND LEASE			
Lessee Name Newsom "B"	Well No. 14-E	Pool Name, Including Formation Basin Dakota	Kind of Lease State, Federal or Fee Federal
			Lease No. SF-078384
Location			
Unit Letter J	: 1700	Feet From The South	Line and 1765 Feet From The East
Line of Section 9	Township 26 North	Range 8 West	, NMPM, San Juan County

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

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)		
El Paso Natural Gas Company				P.O. Box 1492, El Paso, Texas 79978 Attention: Mr. R.E. Johnson		
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	J	9	26N	8W	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.
Date Spudded 5/31/80	Date Compl. Ready to Prod. 11-22-80			Total Depth 7019'	P.B.T.D. 6972'				
Elevations (D/E, RT, GR, etc.) 6498' GR	Name of Producing Formation Dakota			Top Oil/Gas Pay 6660'	Tubing Depth 6607'				
Perforations 6660, 61, 62, 63, 64 - 6724, 26, 28, 30, 32, 34, 42, 44, 46 - 6807, 08, 09				62, 64, 66, 68, 70.		Depth Casing Shoe 7004'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12 1/4"	8 5/8" - 24#		317'		250 sx. Class B				
7 7/8"	5 1/2" - 20#		7004'		1406 sx. 50/50 Poz.				
	1 1/2"		6607'						

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be at least 24 hours before test or be for full 24 hours)

OIL WELL			
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Oil Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

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 OIL CON. COM.
 DIST. 3

GAS WELL

Actual Prod. Test-MCF/D 412	Length of Test 3 Hours	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pistol, back pr.) Back Pressure	Tubing Pressure (shut-in) 1556 PSIG (23 FTP)	Casing Pressure (shut-in)	Choke Size .75

1. 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.

[Signature] for John H. Hill, et al
on behalf of land agent ^(Notary) Supron Energy Corp.
~~Exploration and Producing Manager~~

12-19-80

(Date)

OIL CONSERVATION DIVISION

APPROVED: DEC 29 1980, 19

BY: Original Signed by FRANK T. CHAVEZ

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 101.

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 Form C-104 must be filed for each pool in multiply completed wells.