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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

Operator Supron Energy Corp. c/o John H. Hill, et al	
Address Suite 020, 300 West Arrington, Farmington, New Mexico 87401	
Reason(s) for filing (Check proper box)	
New Well <input 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"/>
Other (Please explain)	

If change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE

Lessee Name Newsom A	Well No. 12	Pool Name, including Formation Ballard Pictured Cliff's	Kind of Lease State, Federal or Fee Federal	Lease No. SF078430
Location				
Unit Letter P	870	Feet From The South	Line and 1030	Feet From The East
Line of Section 3	Township 26 North	Range 8 West	, NMPM, San Juan County	

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)	
Gas Company of New Mexico	P.O. Box 1899, Bloomfield, N.M. 87413 Attn: Stella Whitaker	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Pge.
	Is gas actually connected? When	
	No	

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

COMPLETION DATA

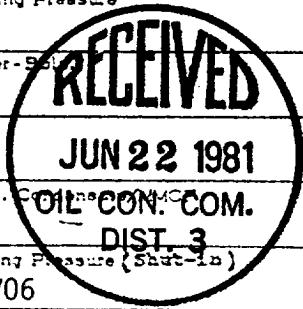
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 4-20-81	Date Compl. Ready to Prod. 5-23-81		Total Depth 3200		P.B.T.D. 3197			
Elevations (DF, RKB, RT, GR, etc.) 6838 Gr	Name of Producing Formation Pictured Cliffs		Top Oil/Gas Pay 2822		Tubing Depth N/A			
Perforations 2822, 30, 38, 40, 42, 44, 46, 48					Depth Casing Shoe 3200'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	24#	2121'	200 Sx Class B
7 7/8"	6.4#	3200'	925 Sx 50/50 Poz

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-Bbl's.	Water-500	Gas-MCF

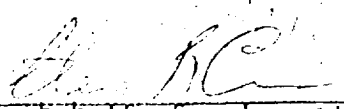


GAS WELL

Actual Prod. Test-MCF/D 395	Length of Test 3 hrs.	Bbls. Condensate —	Gravity of Condensate —
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
		706	.75

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.

 for John H. Hill, et al
on behalf of and agent for Supron Energy Corp.
Exploration/Producing Manager
(Title)
6-17-81
(Date)

OIL CONSERVATION COMMISSION
APPROVED JUN 22 1981
BY Original Signed by FRANK T. CHAVEZ
TITLE SUPERVISOR DISTRICT # 3

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.