

NO. OF COPIES RECEIVED	
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

Operator Supron Energy Corporation % John H. Hill, et al	
Address Kyser 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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Taliaferro	Well No. 4-E	Pool Name, including Formation Blanco Mesa Verde	Kind of Lease State, Federal or Fee Federal	Lease No. SF-078244
Location Unit Letter C ; 830 Feet From The North Line and 1850 Feet From The West Line of Section 29 Township 31 North Range 12 West , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Plateau Oil Company	Address (Give address to which approved copy of this form is to be sent) 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"/> Southern Union Gathering Company	Address (Give address to which approved copy of this form is to be sent) 1st International Building, Dallas, Tx 75270 Attn: Mr. R. J. McCrary			
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 29	Twp. 31	Rge. 12
				Is gas actually connected? when 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 Reg.	Diff. Res'v.
		XX	XX					
Date Spudded 7/14/80	Date Compl. Ready to Prod. 2-7-81	Total Depth 7071' MD			P.E.T.D. 7010' MD			
Elevations (DF, RKB, RT, GR, etc.) 6030' GR	Name of Producing Formation Mesa Verde		Top Oil/Gas Pay 4717'		Tubing Depth 4698'			
Perforations 4832, 56, 71, 86, 4910, 12, 30 4717, 19, 22, 28, 35, 39, 50, 54, 61, 74, 82, 85, 92, 94, 96, 98, 4806					Depth-Casing Shoe 7040'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8-5/8"		335.8'		250 Sx Class B			
7-7/8"	5 1/2"		7040'		1495 Sx 50/50 Poz			
	1 1/2"		4698'					

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 1222	Length of Test 3 Hours	Bbls. Condensate/MACF	Gravity of Condensate
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 1007	Casing Pressure (Shut-in) 1	Choke Size 3/4

VI. 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)

(Date)

OIL CONSERVATION COMMISSION

APR 1 1981

APPROVED \_\_\_\_\_, 19

Original Signed by FRANK T. CHAVEZ

BY \_\_\_\_\_

TITLE \_\_\_\_\_

SUPERVISOR DISTRICT \_\_\_\_\_

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.