NO. OF COPIES REC	~		
DISTRIBUTIO	1		
SANTA FE			
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U.S.G.S.			
LAND OFFICE			
RANSPORTER	OIL	1	
	GAS		
OPERATOR		1/	
		1	

(Date)

	SANTA FE			CONSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-1				
	U.S.G.S.	+	AUTHORIZATION TO TO	AND	Effective 1-1-65				
	LAND OFFICE	1 1	AUTHORIZATION TO T	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS					
	TRANSPORTER OIL GAS	1							
ı	PRORATION OFFICE	1/							
	Operator								
	Address	orgy C	orporation						
	Reason(s) for filing (Check	proper be		7401 Other (Please explain)					
	Recompletion Change in Ownership		Change in Transporter of: Oil Dry (Casinghead Gas Cond	Gas Change in na	me of operator				
	If change of ownership gir and address of previous o								
II	DESCRIPTION OF WEI	LL ANI	LEASE						
	Jicarilla "K"		Well No. Pool Name, Including 13 South Blanco		eral or Fee Federal Contract 145				
	Unit Letter E	_; _14,	50 Feet From The North L	ine and 1070 Feet Fro	om The West				
	Line of Section 11	T	ownship 25 North Range	5 West , NMPM, Ric	Arriba County				
III.	DESIGNATION OF TRA	INSPOR	RTER OF OIL AND NATURAL G						
	Plateau, Inc.			Farmington, New Mex	proved copy of this form is to be sent)				
	Name of Authorized Transpo		WICO	Address (Give address to which approved copy of this form is to be s 1st International Eldg., Baller, Texas 7 Attn: R. J. licorary					
	If well produces oil or liquid give location of tanks.	is,	Unit Sec. Twp. Rge.	Is gas actually connected?	When				
IV.	If this production is commi	ingled w	ith that from any other lease or pool	, give commingling order number:					
	Designate Type of Completion - (X)		New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.					
	Date Spudded	***	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
	Elevations (DF, RKB, RT, C	R, etc.	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth				
	Ferforations				Depth Casing Shoe				
				D CEMENTING RECORD					
	HOLE SIZE		CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				
V.	TEST DATA AND REQUEST FOR ALLOWABLE (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				
i			1						
!	GAS WELL Actual Prod. Test-MCF/D		Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate				
	Testing Method (pitci, back)	pr. /	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size				
VI.	I. CERTIFICATE OF COMPLIANCE			27 1977					
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.			a description of					
	_			TO THE STATE OF TH	Engliseer dist. No. 3				
	Original Sig Rudy D. Ma	•			compliance with RULE 1104.				
-	Rudy D. Nott		iture)	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					
_	Area Superir	rtende	nt	tests taken on the well in acco	ordence with RULE 111.				
	June 25, 1	(Tit 197 7	le)	able on new and recompleted	vells.				
_				Fill out only Sections I, II, III, and VI for changes of owner,					

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.

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LAND OFFICE				
OIL	1			
GAS	1			
OPERATOR				
PRORATION OFFICE				
	OIL GAS	OIL / GAS /		

June 25, 1977

(Date)

<u> </u>	DISTRIBUTION		NEW MEXICO OIL O	CONSERVATION COMMISSION	Form C-104		
SAN'	TA FE		REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-11		
U.S.		 	1	AND	Effective 1~1-65		
	D OFFICE		AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	GAS		
	NSPORTER GAS	17.	-				
OPE	RATOR	+	-				
	RATION OFFICE	<u> </u>					
Opera							
	Supron Ene	x8y Co	proration				
Addre		10 a - 7.	erreineban Bar Barriana C7	Z01			
Page	on(s) for filing (Check p		undington, New Mexico 87				
New V		noper our	Change in Transporter of:	Other (Please explain)			
Recon	npletion		Oil Dry Go	as Change in name	e of operator		
Chang	ge in Ownership		Casinghead Gas Conde	nsate			
Tf abou							
	nge of ownership give Idress of previous ow						
II Drac							
	RIPTION OF WEL	L AND	Well No. Pool Name, Including F	ormation Kind of Lea	ise Contract		
	Jicarilla "K"		13 Otero Cha	Cra State, Fede			
Locat	ion				1		
Un	it Letter E	1.45	Feet From The ANDUCH Lir	ne and1070 Feet From	n TheWest		
	4.4	-		_			
Lit	ne of Section 11	Tov	wnship 25 North Range	5 West , NMPM, Ric	Arriba County		
III BEGI	CNIAMIONI OF MR.A	NGBOB!	TED OF OIL AND MATURAL OF	15			
	of Authorized Transpor		TER OF OIL AND NATURAL GA		roved copy of this form is to be sent)		
i	Plateau, Inc.			Farmington, New Mexi			
	of Authorized Transpor	rter of Cas	singhead Gas or Dry Gas 🔀	Address Give address to which app			
	Gas Company of	New P	ferri co	Attn: R. J. McGrary	ig., marras, remas 19210		
If wel	l produces oil or liquid	.s,	Unit Sec. Twp. Rge.	Is gas actually connected?	/hen		
give 1	ocation of tanks.						
		ngled wi	th that from any other lease or pool,	give commingling order number:			
IV. COMI	PLETION DATA		Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
De	esignate Type of C	ompletic					
Date :	Spudded		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
Ì							
Eleva	tions (DF, RKB, RT, G	R, etc.;	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
ļ					Depth Casing Shoe		
Perfor	rations				Depin Cusing Shoe		
			TUBING, CASING, ANI	D CEMENTING RECORD			
	HOLE SIZE		CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
Ĺ							
	T DATA AND REQU WELL	UEST FO	OR ALLOWABLE (Test must be a able for this de	ifter recovery of total volume of load of epth or be for full 24 hours)	il and must be equal to or exceed top allow-		
	First New Oil Run To	Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)		
i							
Lengt	h of Test		Tubing Pressure	Casing Pressure	Choke Size		
				Water-Bbls.	Gas MCF // M		
Actua	l Prod. During Test		Oii-Bbls.	Wilder - Barts.	100000000000000000000000000000000000000		
l					1011/01/01/01/01		
GAS	WELL						
	I Prod. Test-MCF/D		Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate		
Testi	ng Method (pitot, back	pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
			1	1			
VI. CERT	TIFICATE OF COM	IPLIAN(CE		ATION COMMISSION		
				APPROVED			
Commi	asion have been co	molied w	regulations of the Oil Conservation with and that the information given	ORASNAL CONED BY M. E. MAXIMELL IR			
above is true and complete to the best of my knowledge and belief.				BY			
Original Signed By Rudy D. M otto			Ву	TITLE PETROLEUM ENGINEER DIST. NO. 3			
			•	This form is to be filed in compliance with RULE 1104.			
	Rudy D. Mott			well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. Attractions of this form must be filled out completely for allow-			
	Area Superin						
		(Tit	ele)	able 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.

NO. OF COPIES RECEIVED			
DISTRIBUTIO			
SANTA FE			
FILE			_
U.S.G.S.			
LAND OFFICE		<u> </u>	
TRANSPORTER	OIL	1	
	GAS	1	
OPERATOR			

-	PISTRIBUTION NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS						C-104 and C-110
-	U.S.G.S. LAND OFFICE IRANSPORTER OIL / GAS / OPERATOR / PRORATION OFFICE	AUTHORIZAT	ION TO TRAIN	SE SICE AND	METONNE ON		
1.	Operator	and the same of the same					
	Supron Energy Cor		- 1 P149 9	C.4			
	P.C. Pox 808, Fax Reason(s) for filing (Check proper box) New Well	Change in Transpo	orter of:	Other (Plea	ise explain)		
	Recompletion Change in Ownership	Oil Casinghead Gas	Dry Gas Condens		e in name of	- Opticioi	
	If change of ownership give name and address of previous owner						
īII.	DESCRIPTION OF WELL AND L	Well No. Pool No			Kind of Lease		Contract
	Jicarilla 'K"	13	Basin D	akota	State, Federal or	Fee Federal	145
	Location Unit Letter E : 1456	Feet From The	North Line	and 1070	Feet From The	West	
	Line of Section 11 Town	aship 25 North	Range 5	5 West , NM	PM, RÍO A	rriba	County
III.	DESIGNATION OF TRANSPORT	ER OF OIL AND I	NATURAL GA	S Address (Give addre	ss to which approved	l copy of this form is to	be sent)
	Plateau, Inc.		Davi Can Car	The state of the s	New Mexico	i convolthis form is to	be sent)
	Name of Authorized Transporter of Cast Gas Company of New M		Dry Gas 🏋	Attn: R. J.	. McGrary	, Dalles, Tere	18 75270
	If well produces oil or liquids, give location of tanks.	Unit Sec. T	wp. Rge.	Is gas actually conn	ected? When		
IV.	If this production is commingled with COMPLETION DATA			TNew Well Workey		Plug Back Same Res	'v. Diff. Res'v.
	Designate Type of Completio	n - (X)	Gas Well	New Well Workey	!		
	Date Spudded	Date Compl. Ready to	Prod.	Total Depth		P.B.T.D.	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Fo	ormation	Top Oil/Gas Pay		Tubing Depth	
	Perforations			1		Depth Casing Shoe	
		TUBINO	G, CASING, ANI	CEMENTING REC		SACKS CEN	IENT
	HOLE SIZE	CASING & TU	BING SIZE	DEPTI	4 SET	SACKS CEN	
v	. TEST DATA AND REQUEST F	OR ALLOWABLE	(Test must be a able for this de	enth or be for full 24 h	iours)	nd must be equal to or	exceed top attow-
	OII. WELL Date First New Oil Run To Tanks	Date of Test		Producing Method (Flow, pump, gas lift	, etc/)	
	Length of Test	Tubing Pressure Oil-Bbls.		Casing Pressure Water-Bbls.		Choke Size Gas-MCF	
	Actual Prod. During Test						
7							
	GAS WELL Actual Prod. Test-MCF/D	Length of Test		Bbls. Condensate/	MMCF	Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (SI	hut-in)	Casing Pressure (1	Shut-in)	Choke Size	
					OIL CONSERVATION COMMISSION		
V	I. CERTIFICATE OF COMPLIAN	10000150	111	N 97 1477	10		
	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.				ORIGINAL SIGN	ED BY N. E. MAXWEL	
Original Signed By Rudy D. Motto				TITLE			
				This form is to be filed in compliance with RULE 11 If this is a request for allowable for a newly drilled o			
	Rudy D. Motto (Sig	nature)		If this is a request for allowable for a newly drilled of deviation 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 multi-			
	Area Superintend	ent ((le)		able on new a	ud tecombieted we	It for ch	anges of owner.
	June 25, 1977	ate)		Fill out 0 well name or n Separate	nly Sections I, II umber, or transport Forms C-104 mus	I. III. and VI for chien, or other such cha t be filed for each	-
				completed wells.			