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| DISTRIBUTION | |
| SANTA FE | |
| FILE | |
| U.S.G.S. | |
| LAND OFFICE | |
| TRANSPORTER | OIL |
| | GAS |
| OPERATOR | |
| PRODUCTION 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-
Effective 1-1-65

I. Operator
Southern Union Exploration Company
Address
1217 Main Street, Suite 400, Texas Federal Bldg., Dallas, Texas 75202
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
Change of operator and address.
If change of ownership give name and address of previous owner
10300 N. Central Expressway, Bldg. V, 5th Fl.
SUPRON Energy Corporation, Dallas, Texas 75231

II. DESCRIPTION OF WELL AND LEASE
Lease Name
Jicarilla "B"
Well No.
9
Pool Name, including Formation
Blanco Mesaverde
Kind of Lease
Jicarilla Apache
State, Federal or Fee
Indian
Lease No.
106
Location
Unit Letter
K
Feet From The
1835
South
Line and
1675
Feet From The
West
Line of Section
26
Township
26N
Range
4W
NMPM,
Rio Arriba
County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☐ or Condensate ☒
Plateau, Inc.
Address (Give address to which approved copy of this form is to be sent)
Box 108, Farmington, NM 87401
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒
Gas Company of New Mexico
Address (Give address to which approved copy of this form is to be sent)
First International Bldg., Dallas, TX 75202
If well produces oil or liquids, give location of tanks.
Unit
K
Sec.
26
Twp.
26N
Rge.
4W
Is gas actually connected?
When

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

IV. COMPLETION DATA
Designate Type of Completion - (X)
Oil Well ☐ Gas Well ☐ New Well ☐ Workover ☐ Deepen ☐ Plug Back ☐ Same Res't'v. ☐ Diff. Res't'v. ☐
Date Spudded
Date Compl. Ready to Prod.
Total Depth
P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)
Name of Producing Formation
Top Oil/Gas Pay
Tubing Depth
Perforations
Depth Casing Shoe
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE
CASING & TUBING SIZE
DEPTH SET
SACKS CEMENT

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
Length of Test
Bbls. Condensate/MMCF
Gravity of Condensate
Testing Method (pilot, back pr.)
Tubing Pressure (Shut-in)
Casing Pressure (Shut-in)
Choke Size

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.
Ronald M. Seitz
Drilling & Production Engineer
12/30/80
OIL CONSERVATION COMMISSION
APPROVED
JAN 28 1981
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 111.
All sections of this form must be filled out completely for all wells, on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of conditions. Separate Forms C-104 must be filed for each well in multiple.