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TRANSPORTER	OIL	
	GAS	
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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

API 30-039-21773

Operator Supron Energy Corporation	
Address P. O. Box 808, 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

DESCRIPTION OF WELL AND LEASE

Lease Name Jicarilla "E"	Well No. 15	Pool Name, Including Formation Wild Horse Gallup	Kind of Lease State, Federal or Fee Federal	Lease No. Contract 104
Location				
Unit Letter L	1645	Feet From The South	Line and 830	Feet From The West
Line of Section 16	Township 26 North	Range 4 West	NMPM,	Rio Arriba County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	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 type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) Mr. R. J. McCrary 1st International Bldg., Dallas, Texas			
Gas Company of New Mexico	Unit L	Sec. 16	Twp. 26N	Pge. 4W
If well produces oil or liquids, give location of tanks.	Is gas actually connected?		When Upon installation of Pipeline Facility	

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 10/12/78	Date Compl. Ready to Prod. 2/13/79		Total Depth 7824'			P.B.T.D. 7815'		
Elevations (DF, RKB, RT, GR, etc.) 6730 Gr.	Name of Producing Formation Gallup		Top Oil/Gas Pay 7113			Tubing Depth 7106		
Perforations Size 0.42" @ 7113', 7115', 7117', 7119', 7121', 7123', 7204', 7205', & 7207'.						Depth Casing Shoe 7818'		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		
13-3/4"	10-3/4"		220			225		
9-7/8"	7-5/8"		3650			200		
6-3/4"	5-1/2"		7818			495		

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 584	Length of Test 3 hrs.	Bbls. Condensate/MMCF -0-	Gravity of Condensate -0-
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (shut-in) 443 PSIG	Casing Pressure (shut-in) 448 PSIG	Choke Size 3/4"

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.

Original Signed By
Rudy D. Motto

Rudy D. Motto

(Signature)

Area Superintendent

(Title)

February 14, 1979

(Date)

OIL CONSERVATION COMMISSION

APPROVED MAR 7 1979, 19
BY Original Signed by A. R. Kendrick
TITLE SECRETARY

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.