J. 01 CO	<b></b> -	15	1
DISTRIBUTION			
ANTA FE		17	
FILE		17	
u.s.g.s.		i	
LAND OFFICE			
TRANSPORTER	OIL		
	GAS	1	
OPERATOR		2	
PROBATION OFFICE			

(Date)

## NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

FILE	REQ	UEST FOR ALLOWABLE AND	Supersedes Old C-104 and C Effective 1-1-65	
U.S.G.S.	AUTHORIZATION TO	AND O TRANSPORT OIL AND NATUR		
OIL				
TRANSPORTER GAS				
OPERATOR	2	AP1 30-039-22041		
PRORATION OFFICE Operator				
Supron Ene	rgy Corporation			
Address				
P.O. Box 8	08, Farmington, New Mexico			
Reason(s) for filing (Check pr	Change in Transporter of:	Other (Please explain	1)	
Recompletion	~··	Dry Gas		
Change in Ownership		Condensate		
If change of ownership give and address of previous own				
. DESCRIPTION OF WELL				
Lease Name	Well No. Pool Name, Includ	i kind of	I LEGRE NO	
Jicarilla "J"	18 South Blan	nco Pictured Cliffs State, F	Cederal or Fee Federal Contract	
Unit Letter A ;	880 Feet From The North			
Oint Letter;	880 Feet From The North	Line and 915 Feet 7	From The East	
Line of Section 36	Township 26 North Range	- 5 West , NMPM, R	Rio Arriba County	
P. 2010 1			County	
Name of Authorized Transporte	SPORTER OF OIL AND NATURAL or of Oil or Condensate			
1	or condensate	Address (Give address to which a	approved copy of this form is to be sent)	
Name of Authorized Transporte	er of Casinghead Gas or Dry Gas X	Address (Give address to which o	approved copy of this form is to be sent)	
Gas Company of N	ew Mexico	* * * * * rucernational	. Dulluing. Dallas, Toyas	
If well produces oil or liquids,	Unit Sec. Twp. Ege	Attn.: Mr. R. J. M e. Is gas actually connected?	When	
give location of tanks.		No	1	
If this production is comming COMPLETION DATA	led with that from any other lease or p	pool, give commingling order number:		
	Oil Well Gas We	ell New Well Workover Deeper	n Plug Back Same Resty Diff Rest	
Designate Type of Con	npletion - (X)	1	n Plug Back Same Restv. Diff. Rest	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
7/11/79 Elevations (DF, RKB, RT, GR,	etc.; Name of Producing Formation	3260	3228	
6678 Ft. R.K.B.	Pictured Cliffs	Top Oil/Gas Pay	Tubing Depth	
Perforations	rictured Cirrs	3130	No Tubing Depth Casing Shoe	
3130 - 31	185		3269	
	TUBING, CASING,	AND CEMENTING RECORD	3207	
HOLE SIZE	CASING & TUBING SIZE		SACKS CEMENT	
9-7/8" 6-3/4"	7-5/8", 20.00#	213	150	
0=3/4**	2-7/8", 6.50#	3269	175	
TEST DATA AND REQUE	ST FOR ALLOWABLE (Test must	be after recovery of total volume of load	oil and must be equal to or exceed top allow	
OII, WELL Date First New Oil Run To Tani	able for thi	a depth or be for juit 24 hours)		
Date First New Oil Hun 10 1dni	Date of Test	Producing Method (Flow, pump, ga	s lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Oil-Bbla.	Water-Bbls.	Gas - MG	
GAS WELL			AUG 17 1979	
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF		
2132	3 Hours	DITT COMMUNICATION NAMED	Gravity of Condensate	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Siz	
Back Pressure		1045	3/4"	
CERTIFICATE OF COMPL	IANCE	OIL CONSER	VATION COMMISSION	
hands as all of the second		APPROVED AUG 21 19		
Commission have been compl	and regulations of the Oil Conservation divided with and that the information give			
bove is true and complete to	o the best of my knowledge and belie	ef. By Original Sign	<b>60</b> (5) (10) (10) (10) (10) (10) (10) (10) (10	
/		TITLE		
1/ 1/	201	<b>[]</b>		
Kannett E. Kou	ldef	<b>) ?</b>	n compliance with RULE 1104.	
enneth E. Roddy	(Signature)	well, this form must be accom	lowable for a newly drilled or deepened panied by a tabulation of the deviation	
roduction Superinter	ident	tests taken on the well in acc	cordance with RULE 111.	
	(Title)	All sections of this form able on new and recompleted	must be filled out completely for allow- wells.	
August 16. 1979		II .		

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.