DISTRIBUTION			
SANTA FE			
FILE			
ປ. <b>s.</b> G. <b>s.</b>			
LAND OFFICE			
IRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			L.
Operator			
Southern	Unior	ı Ex	(p1
Address			
2027 11 20 Charact C			

## NEW MEXICO OIL CONSERVATION COMMISSION

SANTA FE	REQUEST F	FOR ALLOWABLE	Supersedes Old C-104 and C-116 Effective 1-1-65		
U.S.G.S.	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
LAND OFFICE					
TRANSPORTER GAS					
OPERATOR		•			
PRORATION OFFICE					
Southern Union Explo	ration Company				
1217 Main Street, Su	ite 400, Texas Federal Bl		2		
Reason(s) for filing (Check proper box)	Change in Transporter of:	Other (Please explain)  Change of operato	or and address		
Recompletion	Otl Dry Gas	' 님	and address.		
Change in Owrership	Casinghead Gus Condens	10300 N Central Expre	ssway, Bldg. V, 5th Fl.		
If change of ownership give name sand address of previous owner	SUPRON Energy Corporation,	Dallas, Texas 75231			
DESCRIPTION OF WELL AND I	LEASE				
Navajo Indian C	Vell No. Fool Name, Including Fo		cr Fee Ind. I-149		
Location	1 South Drance 1		11145		
Unit Letter D: 104	6 Feet From The North Line	and 1072 Feet From T	he . West		
Line of Section 37 Tow	enship 27N · Range	8W , NMPM,	San Juan County		
DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	S			
Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which approve	ed copy of this form is to be sent)		
Name of Authorized Transporter of Cas	inghed Gas or Dry Gas X	Address (Give address to which approved in the International Bldg.	ed copy of this form is to be sent)		
Gas Company of New M	exico	Dallas, Texas Attn: R.			
If well produces oil or liquids, give location of tanks.	Dink Sec. 1wp. 7.ce.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	th that from any other lease or pool, a	give commingling order number:			
Designate Type of Completion		New Well Workover Deepen	Plug Back   Same Resty. Diff. Resty.		
Date Spudded	Date Compl. Ready to Frod.	Total Depth	P.B.T.D.		
(DE DKD DT CD	Name of Producing Formation	Top Oil/Gas Pay	Tuking Depth		
Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Politicion	100 017 017 17			
Perforations Depth Casing Shoe					
	TUBING, CASING, AND	<del></del>			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
		i I			
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 hows)					
OII, WELL Date First New Oil Frum To Tanks	Date of Test	Producing Method (Flow, pump, gas lift	, etc.)		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
		Water - Bbis.	Gos-MCF		
Actual Prod. During Test	Cil-Bbis.	WG187 + 5 2,8.			
GAS WELL	Length of Test	Bble. Concensore/MMCF	Grevity of Concensate		
Testing Method (pitot, back pr.)	Tuting Pressure (Sont-in)		Choire Sixe		
, esting weined (phot, back proy			· Section of the sect		
CERTIFICATE OF COMPLIANCE	C <b>E</b>	14	TION COMMISSION		
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.		APPROVED JAN 26 1981 Original Signed by FRANK T. CHAVEZ 19			
		BY			
TITLESUPERVISOR DISTRICT 勝3					
This form is to be filed in compliance with RULE 1104.					
If this is a request for allowable for a newly drilled or de well, this form must be accompanied by a tabulation of the de			sied by a tabulation of the deviction		
Drilling & Production Engineer  tests taken on the well in accordance with RULE 111.  All sections of this form must be filled out completely form			it be filled out completely for allow		
· / \alpha / \alpha / \alpha \cdot \alpha \cdot \left \cdot \left \cdot \left \cdot		able on new and recompleted wells.  Fill out only Sections I. II. III, and VI for changes of owner.			
(Daie)		well name or number, or transporter, or other such change of condition.			