NO. OF COPIES HEC	EIVED		
DISTRIBUTION			
SANTA FE			
FILE			
u.s.g.s.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			

	DISTRIBUTION	DISTRIBUTION NEW MEXICO OIL CONSERVATION COMMISSION						
	SANTA FE	1	REQUEST FOR ALLOWABLE			Form C-104 Supersedes Old C-104 and C-11		
	FILE				Effective 1-1-65	•		
	U.S.G.S.	AUTHORIZATION TO TRA	ON TO TRANSPORT OIL AND NATURAL GAS			-		
	LAND OFFICE							
	TRANSPORTER GAS	-						
	OPERATOR							
1.	PRORATION OFFICE					· · · · · · · · · · · · · · · · · · ·		
Operator Company Company tion								
	Supron Energy Corporation							
	P.O. Box 808, Farmington, NM 87401							
	Reason(s) for filing (Check proper box) Other (Please explain)							
	New Well Change in Transporter of:							
	Recompletion Oil Dry Gas							
	Change in Ownership Casinghead Gas Condensate							
	If change of ownership give name and address of previous owner							
11.	DESCRIPTION OF WELL AND	LEASE				,		
	Lease Name	Well No. Pool Name, Including F	ormation	Kind of Lease		Lease No.		
	Congress	6-E Bloomfield Cha	acra Ext.	State, Federal of F	ee Fed. S.F.	047020 B		
	Location		4700		₽4			
	Unit Letter 0 ; 990	Feet From The South Lir	ne and <u>1790</u>	Feet From The	<u> </u>			
	Line of Section 35 To	wnship 29N Range	11W , NMPI	M. San Ju	an	County		
	Line of Section 35 To	2/2	1.16	<u> </u>				
III.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	AS			1		
	Name of Authorized Transporter of Oi.	or Condensate	Address (Give address	to which approved co	opy of this form is to	be sent)		
		D. 0.	Vision oddens	to which approved or	any of this form is to	be_sent)		
	Name of Authorized Transporter of Ca							
	Southern Union Gathering Co. Attention: Mr. R.J. McCrary Unit Sec. Twp. Ege. Is gas actually connected? When			ry				
	If well produces oil or liquids, give location of tanks.							
	<u> </u>	at that from any other lease or pool		er number:				
	If this production is commingled win COMPLETION DATA	th that from any other lease or pool,	give comminging ordi					
		Oil Well Gas Well	New Well Workover	Deepen Plu	g Back Same Res	v. Diff. Restv.		
	Designate Type of Completi		XX		3.T.D.	1		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth 6563	P.E	6522			
	3/14/81 Elevations (DF, RKB, RT, GR, etc.)	6/3/81 Name of Producing Formation	Top Oil/Gas Pay	Tul	bing Depth			
		5730 R.K.B. Chacra		1	No Tubing			
	Perforations				Depth Casing Shoe			
	2834 - 2948				6563	6563		
		TUBING, CASING, AN		i i	SA SYS SEN			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEM	ENI		
	12 1/4" 7 7/8"	8 5/8", 32.00# 4 1/2", 10.50#	290 6563		200 1250 (3 S	tages)		
	1 1/8	4 1/2 9 10.50#	0,00		12 JU VJ BUAGES			
₩.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	ifter recovery of total vol	ume of load oil and m	ust be equal to or e	xceed top allow		
٠.	OIL WELL	OH. WELL						
	Date First New Oil Run To Tanks	Producting Method (1 tob), policy, got toy,		,				
	Length of Test	Tubing Pressure	Casing Pressure	Chi	ok o Size			
	Langin of Year				/ KILTIV			
	Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	9	- MCF	.01		
	4				JUN 8	· -		
			1	OIL CON CO	31			
	GAS WELL	Length of Test	Bbls. Condensate/MM	CF Gr	with and design	//- /		
	Actual Prod. Test-MCF/D 2757	3 Hours			101.3			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shu	t-in) Chr	ok • Size			
	Back Pressure		863		3/4 ^H			
1 /1	CERTIFICATE OF COMPLIAN	CE	OIL	CONSERVATIO	и сомизато	b 1		
₹1.	a to the charten and regulations of the Oil Conservation		OIL CONSERVATION COMMISSION APPROVED Oliminal Stand by SPANK T. CHAVET					
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and believed.			BY DISTRICT # 3					
	1 Anh	1 100		TITLE SUPERVISOR DISTAILS #, 5 This form is to be filed in compliance with		1104		
Kenneth E. Kokky			1	for allowable	for a nawly drille	d or deepened		
			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					
Kenneth E. Roddy (Senature) Production Superintendent			tests taken on the well in accordance with RULE 111.					

(Title)

(Date)

June 5, 1981

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.