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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

I. Operator **Supron Energy Corporation**
Address **P. O. Box 808, Farmington, New Mexico 87401**
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)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Husaker	Well No. 2-R	Pool Name, Including Formation Basin Dakota	Kind of Lease State, Federal or Fee Federal	Lease No. SP078506
Location Unit Letter B ; 1140 Feet From The North Line and 1750 Feet From The East Line of Section 26 Township 31N Range 9W , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Plateau Incorporated	Address (Give address to which approved copy of this form is to be sent) PO Box 103 Farmington, New Mexico 87401			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Southern Union Gathering Company	Address (Give address to which approved copy of this form is to be sent) 1st International Bldg, Dallas, Texas			
If well produces oil or liquids, give location of tanks.	Unit B	Sec 26	Twp 31N	Range 9W
Is gas actually connected?		Open installation of pipe-line facility		

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'v.	Diff. Res'v.
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudded 3/18/78	Date Comp. Ready to Prod. 11/28/78	Total Depth 7656		P.B.T.D. 7694				
Elevations (DF, RKB, RT, GR, etc.) 6411 CR.	Name of Producing Formation Basin Dakota	Top Casing Pay 7596		Tubing Depth 7500				
Perforations 7598 ft. to 7676' with 44 shots Size 0.42"				Depth Casing Shoe 7724				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13-3/8"	10-3/4"		275'		250			
9-7/8"	7-5/8"		3557'		667			
6-3/4"	5-1/2"		7724'		375			

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 First Test-MCF/D 1191	Test 3 hrs.	Bbls. Condensate/MMCF 0	Gravity of Condensate 46
Testing Method (flow, back pr.) Back Pressure	Shut-in 0.5	Casing Pressure (shut-in) 110	Choke Size 3/4"

VI. CERTIFICATE OF COMPLETION

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.

Rudy D. Motto
Area Superintendent

November 29, 1978

(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
Original Signed by **FRANK T. CHAVEZ**
BY _____
TITLE **DEPUTY OIL & GAS INSPECTOR, DIST. #3**

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.