Form C-107 Revised 10-1-78

ENERG.

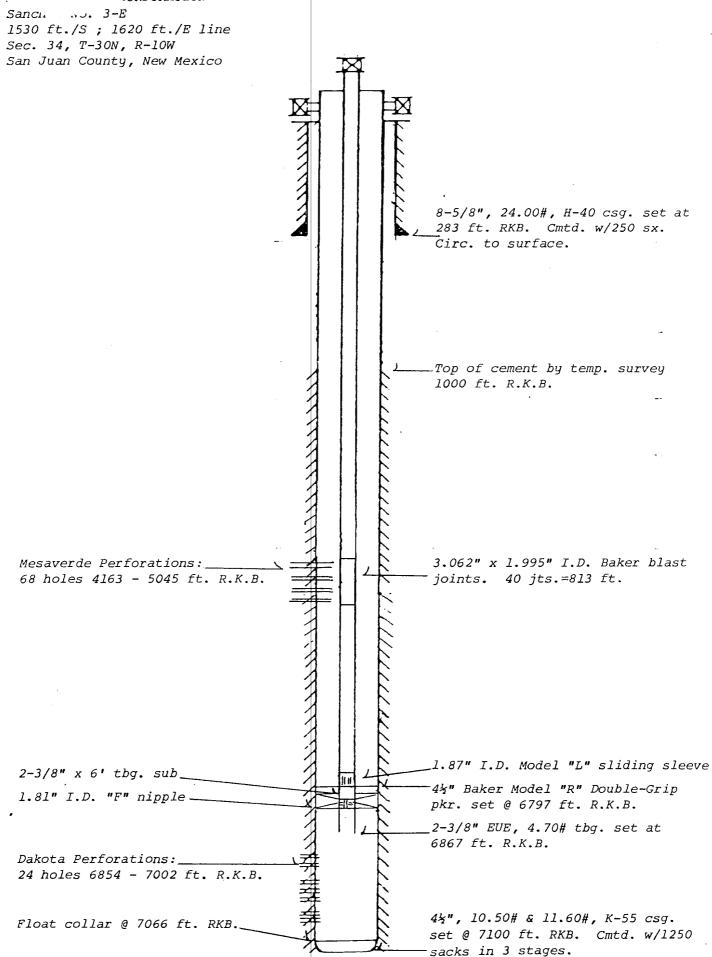
SANTA FE, NEW MEXICO 87501

APPLICATION FOR MULTIPLE COMPLETION

Operator		County	Date	Date -		
SUPRON ENERGY CORPORATION		San Juan	56	September 10, 1981		
Address		Lease		Well No.		
P.O. Box 808, Farmington	n. New Mexico 87401	Sanchez	3-	-F		
		wnship	Ran			
of Well J	34	30 North	· 1			
1. Has the New Mexico Oil Conservation			1 20) West		
 Has the New Mexico Oil Conservation zones within one mile of the subject 	malls Are	iorized the multiple completion	n of a well i	n these same pools or in the same		
2. If answer is yes, identify one such i		NO XX				
2. It answer is yes, identify one such i	nstance: Order No	; Operator Lea	se, and Well	No.:		
3. The following facts are submitted:	Ussas					
-	Upper Zone	Intermedia	M. Service	Lower		
a. Name of Pool and Formation	Blanco Mesaverde	Cone	11 /1	Zone		
b. Top and Bottom of	Bianco Mesaverde		- /	Basin Dakota		
Pay Section			ILLU /			
(Perforations)	1162 5015	SEDI	3 1004			
c. Type of production (Oil or Gas)	4163 - 5045	SEP 16		6854 - 7002		
d. Method of Production	Gas	OIL CON.	-COM	Gaş		
(Flowing or Artificial Lift)		DIST				
	Flowing	5.61		Flowing		
1. The following are attached. (Please of	check YES or NO)					
Yes No						
a. Diagrammatic Sketch	of the Multiple Completion.	, showing all casing strings, i	including dia	meters and setting depths, central		
1 Let 3 and 701 tarbuile	as and location thereof, du	ANCIFICS DEED AND FOR OF CEMAI	nt nackaeatas	imeters and setting depths, central l intervals, tubing strings, includin her information as may be pertinent		
b. Plat showing the loca	tion of all wells on applica	int's lease all offcer walls	and such ou	ises, and the names and addresse		
or operators of an ica	ses offsetting applicant's l	ease.	on offset lea	ises, and the names and addresse		
X c. Waivers consenting to	such multiple completion	from each offset operator, or	in lieu there	of, evidence that said offset opera		
Cois have been fullis	ned copies of the applicati	on.				
X d. Electrical log of the	well or other acceptable lo	g with tops and bottoms of p	roducing zor	nes and intervals of perforation in		
				omitted as provided by Rule 112-A.		
List all offset operators to the lease	on which this well is locate	ed together with their correct r	mailing addre	ess.		
Amoco Production Company	17th & Broadway	, Denver, Colorado	80202			
El Paso Exploration	- P.O. Box 289, H	Farmington, New Mexic	co 87 4 01	l		
	•					
Mesa Petroleum	- P.O. Box 579, F	lora Vista, New Mexi	ico 8741	15		
Southland Royalty Company	1 - P.O. Drawer 570), Farmington, New Me	exico 87	7401		
	•					
				-		
Were all operators listed in Item 5 abo	ove notified and furnished a	copy of this application?	TEC XX N	0 1/		
date of such notification June	8, 1981	copy of this application:	ES_NN_N	O If answer is yes, give		
		+ •				
CERTIFICATE: I, the undersigned, so	rate that I am the Produc	tion Superintendent	f .1 C77			
CORPORATION (con	many) and that I am auch	prized by said same	or the <u>50</u>	FRON ENERGY		
der my supervision and direction and that	at the facts stated therein a	re true, correct and complete	e this report; to the best o	and that this report was prepared		
		/		- my anowicuge.		
	•	W 1.	/////			
		Nennett E.	Kaddi			
		Vonnoth E Deda	Signatur			
		Rennero E. Rodan				

should waivers from all offset operators not accompany an application for administrative approval, the New Mexico Oil Conservation Division will hold the application for a period of twenty (20) days from date of receipt by the Division's Santa Fe office. If, after said twenty-day reriod, no protest nor request for hearing is received by the Santa Fe office, the application will then be processed.

OTE: If the proposed multiple completion will result in an unorthodox well location and/or a non-standard proration unit in one or more of the producing zones, then separate application for approval of the same should be filed simultaneously with this application.



OIL CONSERVATION DIVISION

SANTA FE, NEW MEXICO PACKER-SETTING AFFIDAVIT (Dual Completion)

PACKER-BE	TIMO IN STATE
(Dua	1 Completion)
STATE OF	SEP 16 1981 OIL CON. COM. DIST. 3
COUNTY OFSan Juan)	01.3
Maryin Kruschke	, being first dully sworn according to law,
upon his oath deposes and says:	nowledge of the facts herein below set out.
	ers in the capacity
•	and as such as its authorized agent.
of <u>Office Manager</u>	81, he personally supervised the setting
of a 4%" Baker Model "R" Double-Grip Pkr.in S	
(Make and Type of Packer)	(operator)
	. 3-E, located inUnit Letter
J Section 34 , Township 30	North , Range 10 West , N.M.P.M.,
San Juan County, New Mexico	•
That said packer was set at a subsurface	depth of 6797 feet, said
depth measurement having been furnished by	Stanley Phillips •
That the purpose of setting this packer between the two strings of pipe where the packer within the well-bore, of fluids produced from produced from a stratum above the packer. The did, when set, effectively and absolutely sea strings of pipe where it was set in such mannacross the packer.	off the annular space between the two
	·
	Baker Packers Company
	Jakhrus May Sont
Subscribed and sworn to before me this the	10th day of September , AD, 1981 .
	Selly Johnson
My Commission Expires: <u>August 25, 1984</u>	

STATE OF NEW MEXICO VERGY AND MINERALS DEPARTMENT

HOT AND MINACH	7.00		
(. 1460	Ĺ	
DISTRIBUTIO		\Box	
BANTA FE			
PILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	DIL		
, , , , , , , , , , , , , , , , , , , ,	Q AS		
OPERATOR			
PRORATION OF	ICE		

1.

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

OPERATOR	AOTHORIZATION					
Operator OFFICE						
•						
SUPRON ENERGY CORPORA'	I'ION					
Address	0.74	107				
P.O. Box 808, Farming	ton, New Mexico 874	101	Other (Please	explain		
Reason(s) for filing (Check proper box)			Office 17 Account			
New Well	Change in Transporter of:		-1 ·			
Recompletion	OII 📙	Dry Ga	• 🔲		•	
Change in Ownership	Casinghead Gas	Conden	sate			·
Change in Ownership						
If change of ownership give name		ن ا				
and address of previous owner						
DESCRIPTION OF WELL AND I	EASE			Wind of Longo		Lease No.
Lease Name	Well No. Pool Name, Incl	uding F	ormation	Kind of Lease	_	
_	3-E Blanco Mes	aver	·de	State, Federal	or Fee Fed. NM	06738
Sanchez	J-B Branco nec	<u> </u>				
Location			7.000	Editor T	he East	
Unit Letter J : 153	O Feet From The <u>South</u>	Lin	• and <u>1620</u>	Feet From T		
				_		County
Line of Section 34 Tow	mahip 30 North Ran	ge <u>1</u>	<u>0 West , NMPM</u>	, San Ju	ian	
Line of Section 31		-				
DESIGNATION OF TRANSPORT	EP OF OU AND NATUR	AL GA	S			
DESIGNATION OF TRANSPORT	or Condensate		Address (Give address	to which approv	ed copy of this form is to	be sent)
Name of Authorized Transporter of Oil			D O BOY 108	Farmingtor	, New Mexico &	37401
Plateau, Inc.	5-2	-	Address (Give address	to which approve	ed copy of this form is to	pe sent)
Name of Authorized Transporter of Cas	inghead Gas or Dry Gas	<u>م</u>	First Internat	ional Buil	ldıng - Dallas,	Texas
Southern Union Gather	ing Company		Attention: Mr	<u>. R.J. MC</u> S	rary	
	Unit Sec. Twp. F	ige.	Is gas actually connect	ed? When		
If well produces oil or liquids, give location of tanks.	' J	1 OW	NO	· · · · · · · · · · · · · · · · · · ·		
give location of tailes.			-ive commingling ards	r number:		
If this production is commingled wit	h that from any other lease of	r pool,	Side comminging orde			
COMPLETION DATA			New Well Workover	Deepen	Plug Back Same Res'	v. Diff. Res
		WE11	1	1		i
Designate Type of Completion	$n = (\lambda)$	XX	XX		P.B.T.D.	
Date Spudded	Date Compl. Ready to Prod.		Total Depth			
	9 -4 9-81		7100		7066	
6-15-81	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth	
Elevations (DF, RKB, RT, GR, etc.)			47.62	•	No Tubing	
6017 R.K.B.	Mesaverde		4163		Depth Casing Shoe	
Perforations	•					
4163 - 5045					7100	
4103 3015	TUBING, CASIN	G. ANI	D CEMENTING RECOR	2D		
	CASING & TUBING SIZ		DEPTH S	ET	SACKS CEM	ENT
HOLE SIZE			283		250	
12-1/4"	8-5/8", 24.00#				1250 (3 stages)
7-7/8"	4-1/2", 10.50# & 11.	60#	7100		1230 13 Beages	
	NO TUBING					
			<u>i</u>		i	
- POWER FO	OD ALLOWARIE (Test m)	ust be a	fter recovery of total voli	ime of load oil a	ind must be equal to or e	rceed top allo
TEST DATA AND REQUEST FO	able for	this de	epth or be for full 24 hour	<i>()</i>		
OIL WELL	Date of Test		Producing Method (Flor	w, pump, gas lif	i, etc.)	" And the second
Date First New Oil Run To Tanks	Bail 6. 1950				AFIL I	
			Casing Pressure		Chol I	
Length of Test	Tubing Pressure		Commit Lienia		/orllivri	
- '						1
Actual Prod. During Test	Oil-Bbls.		Water-Bbls.		1 - 400	1 1
Actual Pred. Burmy 1991			1		SEP 16 198	
					THE CON. CO.	и. 📗 🐬
	•				/ CAT COM: CO	
GAS WELL			Bbis. Condensate/MMC	F	Gravity of Danianone	
Actual Prod. Test-MCF/D	Length of Test		Doing Condendate, Minic			
5366	3 hours				Choke Size	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)		Cosing Pressure (Shu	c-1n j		
1	_		1027		3/4"	
Back pressure	<u> </u>		011 0	ONSERVAT	ION DIVISION	
CERTIFICATE OF COMPLIANCE	C E		. 012 0	01402110711	OCT 1	բ 1 991
			400000050		UUIL	Y9
I hereby certify that the rules and r	egulations of the Oil Conser	vation	APPROVED			
Division have been complied with	and that the information give	en	BY Original Si	gned by FRAN	(T. CHAVEA	
Division have been complled with above is true and complete to the	best of my knowledge and	beller.	BY		SUPERVISOR DIS	TDICT # 2
	Ω_{0} Ω		TITLE		THE POOR DIS	TAIOI
	////		11		4, .a.a -	
Konneth E. Kon	Kdle		This form is t	o be filed in a	compliance with RULE	, 11 04. .d.a.daraar
justin e	/		If this is a re-	quest for allow	vable for a newly drille	f the deviation
Kenneth E. Roddy (Signature)			well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.			
Stantmax			tests taken on the	**** *** **** ***	at be filled out comple	tely for allo
Production Superinter	ndent		All sections of	or this form mu	ella.	•
(Tie	tle)		- 13		THE AND THE CHAI	ages of owne
September 10, 1981		+	II II mame or numb	er, or transport	CHOL OTHER DECK	
Jepeember 207 2002			il well hame of house	ns C-104 mus	t be filed for each p	ool in multis
			Separate For		· · · · · · · · · · · · · · · · · · ·	

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TRANSPORTER					
	G A 5	İ			
OPERATOR					
PRORATION OF	ICE				
Operator					
Union Tex	as Pe	tro	leu		

	U.S.G.S. LAND OFFICE	AUTHORIZAT		CO OIL CONSERVATION COMMISSION QUEST FOR ALLOWABLE AND TO TRANSPORT OIL AND NATURAL GA			Form C-104 Supersedes Old C-104 and Effective 1-1-65 AS		
1.	OPERATOR PROBATION OFFICE Operator Union Texas Petroleu	m Corporation					· · · · · · · · · · · · · · · · · · ·	211 23 10c)
	Address 1860 Lincoln Street, Reason(s) for filing (Check proper box New We!! Recompletion Change in Ownership X	, Suite 1010, De	orter of:	Colora Dry Gas Condensate		Other (Please	ioducing	hip to Company succes reporation	sor to
	If change of ownership give name and address of previous owner		orpora	tion, I	P.O.	Вох 808,	Farming	ton, New Mexico	87401
11.	Lease Name SANCHEZ Location	Well No. Pool Na		SAVERDI			Kind of Leas State, Federa	alorFeeFed NM	06738
	Unit Letter J : 1530	Feet From The_	SOUTH Range		VEST	1620 , nmpm	Feet From		Count
III.	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil Plateau, Inc.			Acid				ved copy of this form is to	be sent)
	Name of Authorized Transporter of Cas Southern Union Gathe		y Gas 🏋	148	ioo i		o which appro	ved copy of this form is to al Building	be sent)
	If well produces oil or liquids, give location of tanks.	Unit Sec. Tw	• •		as act	ES TO TO THE CONTROL OF THE CONTROL		02/18/82	
	If this production is commingled wit COMPLETION DATA		ease or p	pool, give	comm	ingling order	number:	·	
	Designate Type of Completio	n = (X)	Gas W		well	Workover	Deepen	Plug Back Same Res	v. Diff. Res
	Date Spudded 06/15/81	Date Compl. Ready to F 09/09/81	rod.	To:	al Depi	100	<u></u>	P.B.T.D	
	Elevations (DF, RKB, RT, GR, etc.) 6017 RKB	Name of Producing Form	nation	1 '		as Pay		Tubing Depth NO TUBING	
	Perforations 4163-5045	1	-					Depth Casing Shoe	
		TUBING,	CASING	, AND CE	MENT	ING RECOR	D	7100	
	HOLE SIZE	8-5/8" 24.		Ē		283	T	SACKS CEMI	ENT
	12-1/4" 7-7/8"	4-1/2" 10. NO TUBING		1,6#		7100		1250 (3 sta	ges)
v.	TEST DATA AND REQUEST FO			his depth o	be for	full 24 hours	<i>.</i>	i and must be equal to or ex	sceed top all
	Date First New Oil Run To Tanks Length of Test	Tubing Pressure			ing Pre		pump, gas lij	Choke Size	
	Actual Prod. During Test	O11 - 3bls.		Wat	er - Bbl	в.		Gga-MCF	
	GAS WELL Actual Prod. Test-MCF/D	Length of Test		Bbl	. Cond	densate/MMCF		Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-	-in)	Cos	ing Pre	ssawe (Shut-	in)	Choke Size	
VI.	CERTIFICATE OF COMPLIANCE	Œ.				OIL C	ONSERVA	Tion commission 2 3 1982	
	I hereby certify that the rules and regulations of the Oil Conserv Commission have been complied with and that the information above is true and complete to the best of my knowledge and Union Texas Petroleum Corporation			Original Signed by CHARLES GHOLSON					
				 TI	TLE.			VSPECTOR, DIST. #3	· · · · · · · · · · · · · · · · · · ·
-	Vice-President 6 10 82	le)		This form is to be filed in compliance with RULE If this is a request for allowable for a newly drilled well, this form must be accompanied by a tabulation of tests taken on the well in accordance with RULE 111. All sections of this form must be filled out complete able on new and recompleted wells. Fill out only Sections I, II, III, and VI for change well name or number, or transporter, or other such change Separate Forms C-104 must be filled for each poor			d or deepen the devisti ely for alle ges of own of conditi-		

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	DISTRIBUTION	NEW MEXICO ON C							
	SANTA FE		CONSERVATION COMMISSION FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and (
	FILE	, KEQOESI	AND	Effective 1-1-65					
	u.s.g.s.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	GAS					
	LAND OFFICE		THE THE THE TATE OF THE						
	TRANSPORTER GAS	-		/Audivid)					
	OPERATOR			JUL 2 3 1982					
1.	PRORATION OFFICE Operator	PROPATION OFFICE							
	DIST. 3								
	Reason(s) for filing (Check proper box	,	Other (Please explain) Change of Owner	-1.0					
	New We!!	Change in Transporter of:		ship to					
	Recompletion Change in Ownership X	Oil Dry Go	F Common Property	g Company Suscessor to					
	Chunge in Ownership X	Casinghead Gas Conder	nsate - From Endings						
	If change of ownership give name and address of previous owner	Supron Energy Corporation	n, P.O. Box 808, Farmin	gton, New Mexico 97401					
11.	DESCRIPTION OF WELL AND	LEASF. Well No. Pool Name, Including Fo	ormation Kind of Lea	ise Lease N					
	SANCHEZ	3-E BASIN DAKOTA	State, Fede	_ = ·					
	Location Unit Letter J ; 15	530 Feet From The SOUTH Lin	e and 1620 Feet From	ГЛСТ					
	Line of Section 34 Tov	waship 30 NORTH Range 10) WEST , NMPM, SAN JI	JAN Count					
***	DECICNATION OF TRANSPORT	TER OF OUR AND NATURAL CAR							
111.	Name of Authorized Transporter of Oil	IER OF OIL AND NATURAL GA ☐ or Condensate [X]	Address (Give address to which app	roved copy of this form is to be sent					
	Plateau, Inc.		P. O. Box 108, Farming	* * * *					
	Name of Authorized Transporter of Cas	singhead Gas or Dry Gas 🔀							
	Name of Authorized Transporter of Casinghead Gas or Dry Gas X 1800 First International Building Southern Union Gathering Co. Dallas, TX 75201								
	If well produces oil or liquids,	Unit Sec. Twp. P.ge.		Then					
	give location of tanks.	J 34 30N 10W	YES	02/18/82					
		th that from any other lease or pool,	give commingling order number:						
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res					
	Designate Type of Completic	pn = (X)		1 1 1					
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
	06/15/81	09/09/81	7100	7066					
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
	6017 RKB	DAKOTA	6854	6867					
		54-7066		Depth Casing Shoe					
	5854-7066 7100 TUBING, CASING, AND CEMENTING RECORD								
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
	12-/14"	8-5/8" 24.0#	283	250					
	7-7/8"	4-1/2" 10.5# & 11.6	# 7100	1250 (3 stages)					
		2-3/8" EUE 4.7#	6867						
	L		<u> </u>	i					
V.	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 all able for this depth or be for full 24 hours)								
	OIL WELL 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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate					
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size					
vı	CERTIFICATE OF COMPLIANO	<u> </u>	OIL CONSERV	ATION COMMISSION					
41.	CERTIFICATE OF COMPETANCE		11	= : :					
	I hereby certify that the rules and r		APPROVED JUL 2	3 1982					
	Commission have been complied wabove is true and complete to the	vith and that the information given	Original Signed by CHARLE	S GHOLSON					
	Union Texas Petroleu		TITLE DEPUTY OF A COST	SECTION DIST. #3					
	_	· · · · · · · · · · · · · · · · · · ·	11						

If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviat tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for all able on new and recompleted wells.

This form is to be filed in comparance with RULE 1104.

Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of conditi Senarate Forms C-104 must be filed for each cool in multi