

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

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 1700 Campbell Centre  
8350 N. Central Expwy, Dallas, TX 75206  
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

THIS WELL HAS BEEN PLACED IN THE POOL  
DESIGNATED BELOW. IF YOU DO NOT CONCUR  
NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE

Lease Name SNM 33-16-33 Well No. 2 Pool Name, Including Formation Undesignated Atoka Kind of Lease State, Federal or Fee State Lease No. NM-1351  
Location  
Unit Letter J ; 1650 Feet From The South Line and 1650 Feet From The East  
Line of Section 33 Township 16 South Range 33 East , NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐  
Southern Union Refining Company Address (Give address to which approved copy of this form is to be sent)  
1900 1st International Bank Dallas, TX 75201  
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐  
Continental Oil Company Address (Give address to which approved copy of this form is to be sent)  
P.O. Box 2197, Houston, TX 77001  
If well produces oil or liquids, give location of tanks. Unit F Sec. 33 Twp. 16 Rge. 33 Is gas actually connected? yes When 4-12-78

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res't.	Diff. Res't.
Date Spudded 1-23-78	Date Compl. Ready to Prod. 4-12-78	Total Depth 13,100'	P.B.T.D. 13,022'					
Elevations (DF, RKB, RT, GR, etc.) 4204.4'	Name of Producing Formation Undesignated Atoka	Top Oil/Gas Pay 12,978	Tubing Depth 12,602'					
Perforations 12,978-12,984'			Depth Casing Shoe 13,100'					

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	371'	375 sxs
12 1/2"	8 5/8"	4300'	DV Tool 1011' 2nd str
7 7/8"	5 1/2"	13,100'	cement total 700 sxs
			950 sxs

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 4-12-78	Date of Test 4-13-78	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs	Tubing Pressure 2700	Casing Pressure Packer	Choke Size 14/64"
Actual Prod. During Test	Oil-Bbls. 450	Water-Bbls. -0-	Gas-MCF 2650

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (piston, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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.

Dan R. Collier  
Dan R. Collier (Signature)

Operations Assistant  
(Title)

April 14, 1978  
(Date)

OIL CONSERVATION COMMISSION

APPROVED APR 20 1978  
BY [Signature]  
TITLE SUPERVISOR DISTRICT I

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 V in case of change 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 multiple completed wells.