AO. OF COPIES RECE	IVED	
DISTRIBUTIO	NC	
SANTA FE		
FILE		
Ų.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
IRANSPORTER	GAS	
OPERATOR		
PRORATION OF	ICE	
Operator		

1	SANTA FE					REQUEST FOR ALLOWABLE						Sup	Supersedes Old C-104 and C-110		
FILE								AND			Eff	ective 1-1-65	į		
	J.S.G.S.			AUTHORIZATION TO TRAN				NSPORT C	IL AND N	ATURAL G	AS				
	LAND OFFICE	T	_												
1	TRANSPORTER	GAS	-	-											
ŀ	OPERATOR	GAS													
1.	PROPATION OF	FICE	1												
•	Operator SUPRON E	SUPRON ENERGY CORPORATION													
	Address Suite 17	Suite 1700 Campbell Centre, 8350 North Central Expressway, Dallas, Texas 75206													
	Reason(s) for filing	son(s) for filing (Check proper box) Other (Please explain)											•		
	New Well	H			•	in Tron	rsporter o			Change :	name of (perator	from		
	Recompletion Change in Ownershi								<u> </u>	Southern Union Production Company					
	If change of owner														
	and address of pre								· · · · · · · · · · · · · · · · · · ·	•					
II.	DESCRIPTION C	OF WEI	LL A	ND I	LEASE Well N	lo. Pool	l Name, I	ncluding Fo	ormation		Kind of Lease			Lease No.	
	Lovington St	tate			1		Midwa	y Abo			State, Federal	or Fee St	ate	E-8563	
		c		440		From Th		rth	e and	1980	Feet From T	`he	West		
	Unit Letter	10	- · 6			7-Sou	+h		37-East	NMDM	 Lea	3		County	
	Line of Section	<u> </u>			nship			Range	······································	, NMPM,					
III.	DESIGNATION O	OF TRA	ANSP	ORT	ER OF O	IL ANI	D NATU	URAL GA	S Address (G	ive address to	o which approv	ed copy of t	his form is t	o be sent)	
	Texas-New Me										ton, "exa				
	'Name of Authorized	Transpo	orter o	f Cas	inghead Gas	XXX	or Dry G	as 🗀	Address (G	ive address t	o which approx	ed copy of t	his form is to	o be sent)	
	Phillips Pet										Bldg., Ba		11e, OK	74004	
	If well produces oil give location of tan		ds,		Unit S	3ec. 16	Twp. 17S	Rge. 37E		aily connecte 25	d? Whe	· N /A			
	If this production i		ingle	d wit	h that from	any oti	her leas	e or pool,	give commi	ngling order	number:				
	COMPLETION I	DATA				TOIL We		Gas Well	New Well	Workover	Deepen	Plug Back	Same Res	v. Diff. Res'v.	
	Designate Ty	pe of C	Comp	letio	n - (X)	! !			<u> </u>		! !			1	
	Date Spudded				Date Comp	l. Ready	to Prod.	•	Total Depti	n.		P.B.T.D.			
	Elevations (DF, RK	KB, RT,	GR, e	tc.j	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth				
	Perforations				<u> </u>							Depth Cas	ing Shoe		
						TUR	NG CA	SING. AND	CEMENT	NG RECOR	D	<u> </u>			
	HOLE	ESIZE			CASING & TUBING SIZE					DEPTH SE			ACKS CEM	IENT	
									ļ			 	<u> </u>		
												+			
v.	TEST DATA AN	ND REG	UES	T F	OR ALLO	WABLI	E (Tes	t must be a	fter recovery	of total volu	me of load oil	and must be	equal to or e	xceed top allow-	
• •	OIL WELL				Date of Te		able	for this de		full 24 hours Method (Flow) , pump, gas lij	ft, etc.)			
	Date 1 list ivew Or											1 61 1 61-			
	Length of Test				Tubing Pro	esewe			Casing Pre	issuf⊕		Choke Siz	•		
	Actual Prod. Durin	g Test	·		Oil-Bbis.				Water - Bbl	s.		Gas-MCF			
	l				<u></u>				<u> </u>			<u> </u>			
	GAS WELL Actual Prod. Test	-MCF/D			Length of	Test			Bbls. Cond	iensate/MMC		Gravity of	Condensate		
									L	4.03	453	Choke Siz			
	Testing Method (p.	itot, bac	k pr.)		Tubing Pro	essme (Shut-in	·}	Casing Pre	ssure (Shut	-111) 	Chore 312			
WY.	CERTIFICATE	CERTIFICATE OF COMPLIANCE							• • • • • • • • • • • • • • • • • • • •	CONSERVA					
	hereby certify that the rules and regulations of the Oil Conservation					APPRO	VED	SEP 1	9 1977	,	19				
	Commission have been complied with and that the information given				BY										
	above is true and complete to the best of my knowledge and belief.					TITLE Air 1. Supr.									
								11							
	Janes,	Jerry Lee (Signature)						This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened							
	Jerru Lee	Jerry Lee (Signature)						11 11 43	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.						
	Engineer, D	Engineer, Drilling and Production						tests to	ken on the	well in acco	suance with	iout compi	 etely for allow-		
		(Title)						All sections of this form must be filled out completely for allowable on new and recompleted wells.							
	June 29, 19	June 29, 1977						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.							
				(D	ate)				Ser	parate Form	s C-104 mus	it be filed	for each p	ool in multiply	
									complet	ed wells.					

