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| 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-111  
Effective 1-1-65

I.

|  |   |  |
|--|---|--|
| Operator<br>Union Texas Petroleum Corporation                      |   |  |
| Address<br>1860 Lincoln Street, Suite 1010, Denver, Colorado 80295 |   |  |
| Reason(s) for filing (Check proper box)                            |   | Other (Please explain)                           |
| New Well <input type="checkbox"/>                                  | Change in Transporter of:               | <del>Change of Ownership to</del>                |
| Recompletion <input type="checkbox"/>                              | Oil <input type="checkbox"/>            | <del>Unicon Producing Company successor to</del> |
| Change in Ownership <input checked="" type="checkbox"/>            | Casinghead Gas <input type="checkbox"/> | <del>Supron Energy Corporation</del>             |

If change of ownership give name and address of previous owner Supron Energy Corporation, P. O. Box 808, Farmington, New Mexico 87401

II. DESCRIPTION OF WELL AND LEASE

|   |               |   |   |           |
|---|---------------|---|---|-----------|
| Lease Name<br>Jicarilla   | Well No.<br>1 | Pool Name, Including Formation<br>Ballard Pictured Cliffs | Kind of Lease<br>State, Federal or Fee <u>Fee</u> | Lease No. |
| Location<br>Unit Letter <u>G</u> ; <u>1600</u> Feet From The <u>North</u> Line and <u>1515</u> Feet From The <u>East</u><br>Line of Section <u>11</u> Township <u>23 North</u> Range <u>4 West</u> , NMPM, <u>Rio Arriba</u> County |               |   |   |           |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|  |  |                   |
|--|--|-------------------|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>                    | Address (Give address to which approved copy of this form is to be sent) |                   |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |                   |
| <u>El Paso Natural Gas Company</u>   | <u>P. O. Box 1492, El Paso, New Mexico 79978</u>                         |                   |
| If well produces oil or liquids, give location of tanks.   | Unit<br><u>G</u>   | Sec.<br><u>11</u> |
|  | Twp.<br><u>23N</u>   | Rge.<br><u>4W</u> |
|  | Is gas actually connected?   | When              |

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. |
|                                      |   | <u>XX</u> | <u>X</u>                   |          |                   |           |             |              |
| Date Spudded<br><u>10/29/59</u>      | Date Compl. Ready to Prod.<br><u>11/10/59</u>                 |           | Total Depth<br><u>3168</u> |          | P.B.T.D.          |           |             |              |
| Elevations (DF, RKB, RT, GR, etc.)   | Name of Producing Formation<br><u>Ballard Pictured Cliffs</u> |           | Top Oil/Gas Pay            |          | Tubing Depth      |           |             |              |
| Perforations<br><u>3054-3130' G</u>  |   |           |                            |          | Depth Casing Shoe |           |             |              |
| TUBING, CASING, AND CEMENTING RECORD |   |           |                            |          |                   |           |             |              |
| HOLE SIZE                            | CASING & TUBING SIZE  |           | DEPTH SET                  |          | SACKS CEMENT      |           |             |              |
|                                      | <u>8-5/8"</u>   |           | <u>114'</u>                |          | <u>50</u>         |           |             |              |
|                                      | <u>4-1/2"</u>   |           | <u>3146'</u>               |          | <u>150</u>        |           |             |              |

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 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            |

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.

Union Texas Petroleum Corporation

(Signature)  
Vice-President

6/11/82 (Date)  
(Title)

OIL CONSERVATION COMMISSION  
JUL 23 1982

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Original Signed by CHARLES GHOLSON

TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #

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.