40. 07 (07)25 826		
DISTRIBUTION .		
SANTA FE		
FILE .		·
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
2222471011 025155		

11.

III.

IV.

VI.

DISTRIBUTION	NEW MEXICO OIL CO	DNSERVATION COMMISSI	ON Form C-104	•
SANTA FE	_	FOR ALLOWABLE		
FILE	1	AND Effective 1-1-65		65
U.S.G.S.	AUTHORIZATION TO TRAI	· ·· · · =	TIDAL CAS	
LAND OFFICE	AUTHORIZATION TO TRAI	NSPORT OIL AND NAT	URAL GAS	
_ 				
TRANSPORTER OIL				
GAS	_			1
OPERATOR				1
PRORATION OFFICE	1			<u>. </u>
Operator			1200	
Union Texas Petroleu	m Corporation		1 10 00	,]
Address			1 79, 69,54.	
	Suita 1010 Danvan Col	onado 80295	Jo Oley.	
	Suite 1010, Denver, Colo			
Reason(s) for filing (Check proper box)	,	Other (Please exp	lain)	
New Well	Change in Transporter of:			
Recompletion	Oil Dry Gas	3	ducing Company succes	3501-60
Change in Ownership X	Casinghead Gas Condens	sate Cupren Enc.	rgy Corporation	
If change of ownership give name	F O	D O D 000 F	i V Marria	07001
and address of previous ownerS	Supron Energy Corporation	, P.U. BOX 8U8, F	armington, New Mexico	3 87401
		·		
DESCRIPTION OF WELL AND	LEASE			
Lease Name	Well No. Pool Name, Including Fo		d of Lease	Lease No.
JICARILLA "J"	14 S. BLANCO PICTU	IRED CLIFES Sta	te, Federal or Fee	153
Location				
T 16F	50 Feet From The SOUTH Line	995 -	EAST	
Unit Letter;;;	Feet From The Line	e andF	eer rom ine	
0.5	. 26 NODTU	E MEST	DIO ADDIDA	<u> </u>
Line of Section 35 Tow	wnship 26 NORTH Range	5 WEST , NMPM,	RIO ARRIBA	County
DESIGNATION OF TRANSPORT	FER OF OIL AND NATURAL GAS	s		
Name of Authorized Transporter of Oil	or Condensate [X]	Address (Give address to w	hich approved copy of this form is	to be sent)
	_	P. O. Box 108. F	armington, NM 87401	
Plateau, inc. Name of Authorized Transporter of Cas	singhead Gas or Dry Gas X			to be sent)
		1800 First Inter	hich approved copy of this form is national Building	,
Southern Union Cathe		Dallas, TX 75201		
If well produces oil or liquids,	Unit Sec. Twp. Rgs.	Is gas actually connected?	When	
give location of tanks.	! I	YES	11/14/68	
and the state of t	th that from any other lease or pool,	give commingling order nu	mber:	
	in that from any other rease or poor,	give comminging order na		
COMPLETION DATA	Oil Well Gas Well	New Well Workover I	Deepen Plug Back Same Re	s'v. Diff. Res'v.
Designate Type of Completion	$\operatorname{pn} = (X)$	l xx	1 1	;
	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
Date Spudded		1	·	
7 22 68	8 23 68	7540	7504	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
6684 RKB	PICTURED CLIFFS	3064	3099	
Perforations		<u> </u>	Depth Casing Shoe	
3064-3130			7538	
		ACTUCULAR DECORA		
	T	CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CE	MENT
13-3/4	10-3/4	320	225	SX
9-7/8	7-5/8	3319	1058 cu	<u>ft</u>
6-3/4	4-1/2	3165-7538	975_cu	ft.
	1-1/2 IJ	3099		
			of land all and must be sevel to se	aread top allow
TEST DATA AND REQUEST F	UK ALLUWABLE (Test must be a)	fter recovery of total volume (pth or be for full 24 hours)	of load oil and must be equal to or	excess top attou
OIL WELL	<u> </u>	Producing Method (Flow, pr	imp. ens lift. etc.)	<u> </u>
Date First New Oil Run To Tanks	Date of Test			
			1 2, ,	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Oil-Bbls.	Water-Bbis.	Gas-MCF	
-				
		<u> </u>		
GAS WELL		Dil Carlanda ANGE	Gravity of Condensa	
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity or Condensa	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in	Choke Size	
CERTIFICATE OF COMPLIAN	CE	OIL CO	NSERVATION COMMISSI	NC
CERTIFICATE OF COMPLIAN	CL	0.2 ==	JUL 2 3 1982	
		APPROVED		. , 19
I hereby certify that the rules and	regulations of the Oil Conservation	Original Signed b	Y CHARLES GHOLSON	
Commission have been complied to the	with and that the information given e best of my knowledge and belief.	BY	7	
		11	_	
Union Texas Petrole	um Corporation	TITLE DEPUTY OIL	GAS INSPECTOR, DIST. #3	
				F 1103
		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepens		
<u></u>		If this is a reques	t for allowable for a newly dri accompanied by a tabulation	of the deviation
Vice - President	iature)	well, this form must be	e accompanied by a tabulation Il in accordance with RULE 1	11.
The - Freshell		All sections of th	is form must be filled out comp	pletely for allow
, (T	itle)	able on new and recor	npieted wells.	-
أرده أدالها	Fill out only Sections I II. III. and VI for changes o			anges of owner
	Date)	well name or number, o	r transporter, or other such cha	nge of condition
(υ	,		2-104 must be filed for each	

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