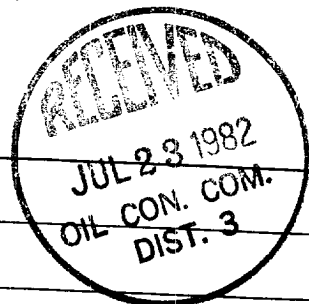


NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-1
Effective 1-1-65



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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

I. Operator
Union Texas Petroleum Corporation
Address
1860 Lincoln Street, Suite 1010, Denver, Colorado 80295
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)
~~Change of Ownership to~~
~~Unicon Producing Company successor to~~
~~Supron Energy Corporation~~
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
JICARILLA "G"
Well No.
5
Pool Name, Including Formation
BLANCO MESAVERDE
Kind of Lease
State, Federal or Fee ☒ Fee
Lease No.
150
Location
Unit Letter L 1450 Feet From The SOUTH Line and 1115 Feet From The WEST
Line of Section 12 Township 26 NORTH Range 5 WEST, NMPM, RIO ARRIBA County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☐ or Condensate ☒
Plateau, Inc.
Address (Give address to which approved copy of this form is to be sent)
Post Office Box 108, Farmington, NM 87401
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒
Gas Company of New Mexico
Address (Give address to which approved copy of this form is to be sent)
1800 First International Bldg.
Dallas, Texas 75201
If well produces oil or liquids, give location of tanks.
Unit L Sec. 12 Twp. 26N Rge. 5W
Is gas actually connected? YES When 12/1/69

IV. COMPLETION DATA
If this production is commingled with that from any other lease or pool, give commingling order number:
Designate Type of Completion - (X)
Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.
Date Spudded 6 29 69 Date Compl. Ready to Prod. 8 9 69 Total Depth 8422 P.B.T.D. 8401
Elevations (DF, RKB, RT, GR, etc.) 7342 RKB Name of Producing Formation MESAVERDE Top Oil/Gas Pay 5625 Tubing Depth 5637
Perforations 8421
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
13-3/4 10-3/4 515 350 SX
9-7/8 7-5/8 4240 750 cu ft
6-3/4 5-1/2 4080-8421 700 cu ft
1-1/2 5637

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

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
(Title)
6/11/82
(Date)
OIL CONSERVATION COMMISSION
APPROVED JUL 23 1982
BY Original Signed by CHARLES GHOLSON
TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3
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.