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SANTA FE				
FILE				
U.S.G.S.				
LAND OFFICE				
IRANSPORTER	OIL			
	GAS			
OPERATOR				
PRORATION OFF				
Operator				
Union Tex	as I	e e	tro	1ϵ
Address .				
1860 Linc				
Reason(s) for filing (Chec	k p	roper	bo
New Well	Ш			
Recompletion	Ш			
Change in Ownership	\mathbf{x}			

Form C-104 Supersedes Old	C-104 and C-11(
Effective 1-1-65	
IVED/	

	SANTA FE		1	CONSERVATION COMMISSION FOR ALLOWABLE				Form C/-104 Supersedes Old C-104 and C-1			
FILE			REQUEST			LOWABLE			Effective 1-1-65		
	U.S.G.S.			AUTHORIZATION TO TR	AND AND	T OIL AND	NATUDAL	CAC			
	LAND OFFICE			- ACTIONIZATION TO TR	MUTUR	I UIL ANL	NATUKAL	GAS			
		OIL									
	IRANSPORTER	GAS						/CCEI			
	OPERATOR	!		-				ari.Fiv	/rd/		
1.	PRORATION OFF	ICE		7			/	WEAL	1 141	1	
	Operator							JUL 23	1982	1	
	Union Texa	as Pet	roleu	um Corporation			1	JULEO	0014	1	
	Address		-			· · · · · · · · · · · · · · · · · · ·		OIL CON.	COM-	/	
	1860 Linc	oln St	reet,	Suite 1010, Denver, Co	lorado	80295	•	DIST.	, 3 🖊		
	Reason(s) for filing (Check pi	oper box)		Other (Plea	se explain)				
	New Well			Change in Transporter of:		Change	of Owners	hip to			
	Recompletion			Oil Dry C	Gas 🔲	Unicon	Producing	Company	cucco	con-to	
	Change in Ownership	X		Casinghead Gas Cond	ensate	i .	Energy Co		1		
	L										
	If change of owners	hip give	name S	upron Energy Corporation	n. P. O	Box 80	8. Farmin	gton. New	Mexic	0 87401	
	and address of previ	ious owi	ner	S,	,		o , rarman	geon, new	HCKIC	0 07 701	
11.	DESCRIPTION OF	E WELL	. AND	LEASE							
	Lease Name		<u> </u>	Well No. Pool Name, Including	Formation		Kind of Leas	e		Lease No.	
	Newsom	В		3 Ballard Pict	ured C1:	iffs	State, Federa	al or Fee Fed	eral	SF-078384	
	Location					· · · · · · · · · · · · · · · · · · ·				<u>pr 07030-</u>	
	11-14 1 -44	L	14.	50 Feet From The South L		990	n n	I	West		
	Unit Letter			reet from the	ine ana		Feet From	The			
	Line of Section	8	Tov	vnship 26 North Range	8 West	t , NMF	м. 5	San Juan		County	
				, and		- , 10,011	,	our our		County	
TI.	DESIGNATION OF	F TRAN	SPORT	TER OF OIL AND NATURAL G	AS						
	Name of Authorized					(Give addres.	to which appro	ved copy of thi	s form is t	o be sent)	
				_						·	
	Name of Authorized 7	Transport	er of Cas	inghead Gas or Dry Gas X	Address	(Give addres:	to which appro	ved copy of thi	s form is t	o be sent)	
	Gas Compai	-			1800	First Ir	to which appro ternation	al Búildi	.ng	,	
H				Unit Sec. Twp. Rge.		s, Texas		en			
	If well produces oil of give location of tanks		•	L 8 26N 8W		Yes			57		
							i	12-19-	-5/		
			gled wit	h that from any other lease or pool	, give com	ningling ord	er number:				
V.	COMPLETION DA	ATA		Oil Well Gas Well	New Well	Workover	Deepen	Plug Back	Same Bes	'v. Diff. Res'v	
	Designate Typ	e of Co	mpletio		1	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, Deapen	I lug Edek	June Hes	. Dill. Res	
	Date Spudded			Date Compl. Ready to Prod.	Total De	nth .	i	P.B.T.D.	<u> </u>	<u> </u>	
	-			09-07-57	Total De	2207	1	F.B.T.D.			
	08-12 Elevations (DF, RKB			Name of Producing Formation	Top O11/	<u>-</u>	-	Tubing Dept	<u> </u>		
			, eic.		Top Ony	_	7	1 .			
	63231	GK		Pictured Cliffs		2068	-	Depth Casin	2141'		
		0167						Depth Casin	g Snoe		
	2068-	2068-2164									
				TUBING, CASING, AN	ID CEMEN			1			
	HOLES			CASING & TUBING SIZE		DEPTH:	SET		CKS CEM	ENT	
		1/4"		9 5/8"		93'		80 Sx			
		7/8"		5 1/2"		2215'		100 SX			
								 			
				<u> </u>	1			<u>.i</u>			
V.	TEST DATA AND	REQU	EST FO				ume of load oil	and must be eq	ual to or e	xceed top allow	
	OIL WELL Date First New Oil R	lun To To		able for this d			w, pump, gas li	ft etc.)	<u> </u>		
	Date First New Oil A	tun 10 10	III E S	Date of Test	Production	å wernog (t.tr	w, pamp, gas ti	,,, е.с.,			
	t anath of Test			Tubing Pressure	Casing P			Choke Size			
	Length of Test			I doing Pleasure	Casing P	tessate		Choke Size			
	Actual Prod. During	Ter		Oil-Bbis.	Water - Bi	ole.		Gas - MCF			
	Actual Prod, During .	. 48(CII-DMS.	"diei-Di	=:		GGS-MCF			
				L							
	G 4 G *****										
	GAS WELL				150.	,		1_			
	Actual Prod. Test-M	CF/D		Length of Test	Bbls. Co	MM\estate / MM	CF	Gravity of C	ondensate		
			 								
	Testing Method (pitor	t, back p	r.)	Tubing Pressure (Shut-in)	Casing P	ressure (Shu	t-in)	Choke Size			
i					ļ			J			
VI.	CERTIFICATE OF	F COM	PLIANC	CE CONTRACTOR OF THE CONTRACTO		OIL	CONSERVA	TION COM	MISSION	1	
							JUL 2	2 1002			
	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.				APPR	OVED	JUL &	0 1702	,	19	
					11	Original C:	adt ensur				
					BY	AINTER 210	ned by FRANK	I. CHAVEZ —			
	Union Tex	Union Texas Petroleum Corporation				SUPER	VISOR DISTRICT	# 3 			
	•										
	;	· \			21		o be filed in	_			
					If	this is a re-	quest for allow	vable for a ne	wly drille	d or deepened	
	N.	Vice	- Preside	eet	well, this form must be accompanied by a tabulation of the deviation teats taken on the well in accordance with RULE 111.				· /!!A AAAIBITOD		
					Al	1 sections o	f this form mu	at be filled or			
		11	1.100	le)	able or	n new and r	ecompleted we	118.			
		<u> </u>	962		Fi	11 out only	Sections I, I	I, III, and VI	for chan	ges of owner,	
		•	(Da	(e)	well name or number, or transporter, or other such change of condition					e or condition.	

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. well name or number, or transporter, or other such change of condition.