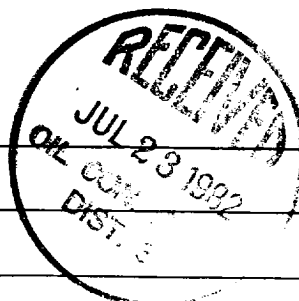


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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

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  
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  
Newsom "A"  
Well No.  
6  
Pool Name, Including Formation  
Basin Dakota  
Kind of Lease  
State, Federal or Fee Fed  
Lease No.  
SF078430  
Location  
Unit Letter  
J  
1745 Feet From The  
South Line and  
1485 Feet From The  
East  
Line of Section  
15  
Township  
26N  
Range  
8 W  
NMPM, San Juan 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 ☒  
El Paso Natural Gas Co.  
Address (Give address to which approved copy of this form is to be sent)  
Post Office Box 1492, El Paso, TX 79978  
If well produces oil or liquids, give location of tanks.  
Unit  
J  
Sec.  
15  
Twp.  
26N  
Rge.  
8W  
Is gas actually connected?  
Yes  
When  
2/23/68

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'tv. ☐ Diff. Res'tv. ☐  
Date Spudded  
9/28/67  
Date Compl. Ready to Prod.  
10/22/67  
Total Depth  
7480  
P.B.T.D.  
7464  
Elevations (DF, RKB, RT, GR, etc.)  
7096  
Name of Producing Formation  
Dakota  
Top Oil/Gas Pay  
7246-7460  
Tubing Depth  
7349  
Perforations  
7460-7448, 7440-7420, 7408-7400, 7390-7388, 7336-7334,  
TUBING, CASING, AND CEMENTING RECORD  
HOLE SIZE  
12 1/2"  
CASING & TUBING SIZE  
8 5/8"  
DEPTH SET  
330  
SACKS CEMENT  
250  
7 7/8"  
4 1/2"  
7479  
1st st w/700 cf, 2nd w/  
900 cf, 3rd w/1200 cf.  
1 1/2" 7349

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  
Vice-President  
(Signature)  
(Title)  
6/10/82  
(Date)  
OIL CONSERVATION COMMISSION  
JUL 23 1982  
APPROVED  
BY Original Signed by FRANK T. CHAVEZ  
SUPERVISOR DISTRICT # 9  
TITLE  
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.