NO. OF COPIES RECE							
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SANTA FE							
FILE							
U.S.G.S.							
LAND OFFICE							
TRANSPORTER	OIL						
	GAS						
OPERATOR							
PRORATION OF	<u>. </u>						
Operator							
Union Texas Petroleu							
Address							
1860 Linc	oln S	tre	et.				

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Supersedes Old C-104 and C-11

Form C-104

All sections of this form must be filled out completely for all sble on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of ow well name or number, or transporter, or other such change of conditions. Separate Forms C-104 must be filed for each pool in mult

L	SANTA FE		KEQUESI		K ALLOWADLL.		Effective 1-1-65		
L	FILE				ND		c cen		
	U.S.G.S.		AUTHORIZATION TO TR	(ANS	PORT OIL AND NATURA	L GA	· CULIIVO		
	LAND OFFICE						/ONLTIVID \		
1	I RANSPORTER OIL					i	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
Ì	GAS					- 1	JUL 23 1982		
l	OPERATOR					•	JUL 23 1302		
.	PRORATION OFFICE						OIL CON. COM.		
1.	Cperator						DIST. 3		
- 1	Union Texas Petro	leu	m Corporation				DIST.		
ŀ	Address								
i	1960 Lingoln Stre	<u>α</u> †	Suite 1010, Denver, Co	olor	ado 80295				
	Reason(s) for filing (Check proper	box)		Other (Please explain)				
		004)	Change in Transporter of:		Change of Owne	rshi	ip-to-		
	New We!1		Oil Dry	Gas			Company successor to		
	Recompletion			densat					
1	Change in Ownership X		Casinghead Gas Cond		- Capacia Energy				
					D 0 D 000 Farm	ni nat	ton New Mexico 87401		
	If change of ownership give nar and address of previous owner	me S	Supron Energy Corporation	on,	P. U. BOX 806, Farm	iriig	ton, new nextee street		
	and address of previous control								
11	DESCRIPTION OF WELL A	ND	LEASE		gtion Kind of :	0050	Lease No.		
41.	Lease Name		Well Mo. Foot Mainer moraling						
	Nickson		19 Ballard Pict	:ure	d Cliffs State, F	aderal .	erree rederal pro78430		
	Location								
	=	96	O Feet From The FNL	i ine d	nd 555 Feet F	'rom T)	west		
	Unit Letter D :;		Feet From The	Line a					
	4.0	_	wmshin 26N Range	8W	, _{NMPM} , San	. Jua	n County		
	Line of Section 14	1.0	wnship ZON Hange						
			OF OUT AND MATTIDAT	CAS			_		
III.	DESIGNATION OF TRANSI	POR	TER OF OIL AND NATURAL or Condensate	UAS A	address (Give address to which	1рргои	ed copy of this form is to be sent)		
	Name of Authorized Transporter of	of OI	or Condensate	- ["					
	1				(Circaldens to which	O D D T O 11	ed copy of this form is to be sent)		
	Name of Authorized Transporter	of Ca	isinghead Gas or Dry Gas 🔀	! 1	1800 First Internat	iona	1 Building		
	Gas Company of Ne]	Dallas, Texas <u>7520</u>	1			
			Unit Sec. Twp. Rge.	I	s gas actually connected?	When			
	If well produces oil or liquids, give location of tanks.			1	Yes	1	2-27-81		
	give location of tunks.				ingling order number				
	If this production is commingle	ed w	ith that from any other lease or po	ol, gi	ve comminging order number	·—			
IV.	. COMPLETION DATA		Oil Well Gas Wel		New Well Workover Deep		Plug Back Same Res'v. Diff. Res		
	Designate Type of Comp	nleti	0	1	1				
	Designate Type of Comp				Total Depth		P.B.T.D.		
	Date Spudded		Date Compl. Ready to Prod.				3204		
	9-14-80		12-15-80		32341		Tubing Depth		
	Elevations (DF, RKB, RT, GR,	etc.j	Name of Producing Formation	1	Top Oil/Gas Pay				
	7059' GR		Pictured Cliffs		2905		No Tbg.		
	Perforations						Depth Casing Shoe		
					·		3230		
	2922-2972 TUBING, CASING, AND CEMENTING RECORD								
			CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT		
	HOLE SIZE		7"	-+	1873'		125		
	10-3/4"				3230'		797		
	6111		2-7/8"		3230				
							+		
	. TEST DATA AND REQUE	ST	FOR ALLOWABLE (Test must	be aft	er recovery of total volume of lo	ad oil	and must be equal to or exceed top al		
V	OIL WELL	.51	able for the	is dep	th or be for full 24 hours)				
	Date First New Oil Run To Tan	ıks	Date of Test		Producing Method (Flow, pump,	gas li	jt, etc./		
	Build 1 222 112 112 112								
	Length of Test		Tubing Pressure		Casing Pressure		Choke Size		
	Laudin of Lear								
			Oil-Bbls.		Water - Bbls.		Gas - MCF		
	Actual Prod. During Test		C 22.0.						
	GAS WELL				Bbls. Condensate/MMCF		Gravity of Condensate		
	Actual Prod. Test-MCF/D		Length of Test		BBIS. Colidanació, Minios				
					Chut-In)		Choke Size		
	Testing Method (pitot, back pr.	.)	Tubing Pressure (Shut-in)	•	Casing Pressure (Shut-in)		Choza 5.25		
) T Y A	INCE		OIL CONS	ERV	ATION COMMISSION		
V	I. CERTIFICATE OF COMP	LIA	MACE			JUL 2 3 1982			
		the Oil Conservation			APPROVED JUL 20 1300 19 19				
	I hereby certify that the rules and regulations of the Oil Conservation			Original Signed by CHARLES GHOLSON					
	I hereby certify that the rules and regulations of the information given Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.				BYOriginal Signed -				
	Union Texas Petroleum Corporation			TITLE . DEPUTY OIL	& GAS	S INSPECTOR, DIST. #3			
					This form is to be fi	led in	compliance with RULE 1104.		
	(,	il		the fee a manuful drilled Of GEED		
		<u>,1</u>			well, this form must be a	ccomp	anied by a tabulation of the devi-		
	Vice - Pres	۱ (S اداره	ignature)		II acces taken on the Well l	n acc	01021100		
	A TOC . E I COINCHÉ				All sections of this form must be filled out completely for all				

19 B2

(Date)