		_				
	NO. OF COPIES RECEIVED					
	DISTRIBUTION	· NEW MEXICO OIL	CONSERVATION COMMISSIO	ON 1	Form C-104	
	SANTA FE	⊢ REQUEST	REQUEST FOR ALLOWABLE		Supersedes Old C-104 and C-1 Effective 1-1-65	
	U.S.G.S.	AND				
	LAND OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS					
	IRANSPORTER OIL					
	GAS					
	OPERATOR		1	_ W _{L n = "}		
I.	PRORATION OFFICE			<u> </u>	9	
	Union Towas Potnolog	um Componation		Dies Co.		
	Union Texas Petroleum Corporation					
	1860 Lincoln Street,	, Suite 1010, Denver, Co	lorado 80295			
	Reason(s) for filing (Check proper box		Other (Please expl			
	New Weil	Change in Transporter of:	Change of	Armorship to ducing Compa	,	
	Recompletion Change in Ownership X	Oil Dry G	<u> </u>	rgy Corporat	J	
	Change in Ownership A	Cusinghed Gds Cond-	ensure	-8, 301 por d t	.1011	
	If change of ownership give name and address of previous owner	Supron Energy Corporati	on, P. O. Box 808,	Farmington,	New Mexico 87401	
11.	DESCRIPTION OF WELL AND	LEASE Well No. Pool Name, Including I	Formation Kinc	i of Lease	Lease No.	
	PIERCE "A"	1 AZTEC PICTURE	i	e, Federal or Fee	FEE	
	Location					
	Unit Letter A ; 990 Feet From The NORTH Line and 990 Feet From The EAST					
	Line of Section 34 Township 29 NORTH Range10 WEST , NMPM, SAN JUAN County					
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL G	AS	 		
	Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)					
	Plateau, Inc. Name of Authorized Transporter of Car	Post Office Box 108, Farmington, NM 87401 Address (Give address to which approved copy of this form is to be sent)				
	El Paso Natural Gas	Post Office Box 1492, El Paso, TX 79978				
	If well produces oil or liquids,	Is gas actually connected?	When	, ,		
	give location of tanks. A 34 29N 10W YES 08/26/54					
	If this production is commingled with that from any other lease or pool, give commingling order number:					
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover De	eepen Plug Bac	ck Same Resty. Diff. Resty	
	Designate Type of Completic	on - (X)	XX	1	1 1	
	Date Spudged	Date Compl. Ready to Prod.	Total Depth	P.B.T.D	· · · · · · · · · · · · · · · · · · ·	
	03/27/54	04/12/54	1932			
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation PICTURED CLIFFS	Top Oil/Gas Pay	Tubing E	Depth	
	Perforations	FICTORED CETT 5			asing Shoe	
	Periorations			1816		
		TUBING, CASING, AN	ID CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT	
	13-3/4"	9-5/8", 32.0#	18	1.0	00	
	7-7/8"	5-1/2", 15.5#	190		00	
		<u> </u>	130	33		
1 7	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be	after recovery of total volume of	load oil and must b	e equal to or exceed top allo	
• •	OH. WELL able for this depth or be for full 24 hours)					
	Date First New Cil Run To Tanks	Date of Test	Producing Method (Flow, pun	np, gas lift, etc.)		
		Tubing Pressure	Casing Pressure	Choke S	ize	
	Length of Test	Tubing Plessine	Cuamy Fressme			
	Actual Prod. During Test	Off-Bbls.	Water - Bbis.	Gas - MC	;F	
	• •					
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity	of Condensate	
	Action. Flod. 1881-MCF/D		THE CHICAGO WAY	5.4.1.7		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Choke S	ize	
VI.	. CERTIFICATE OF COMPLIANCE		OIL CON	SERVATION C	OMMISSION	
				OIL CONSERVATION COMMISSION JUL 2 ? 1982		
	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.		I U. Lycken			
			BY	Original Signed by CHARLES GHOLSON BY		
	Union Texas Petroleum Corporation		PERSON OF STAR INCOLCTOR DICT. #2			
	outou tevas terroteam corboracton		TITLE DEPUTY GIE & GAS INSTECTOR, DIST. #3			

(Signature)
Vice - President

(Date)

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 allow able 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 multiple