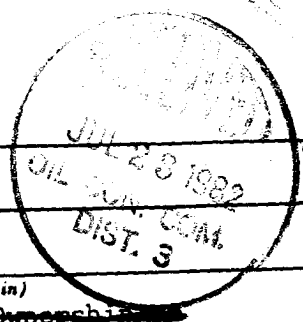


SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Supersedes Old C-104  
Effective 1-1-85



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~~  
~~Union Producing Company~~  
Supron Energy Corporation

If change of ownership give name and address of previous owner  
Supron Energy Corporation, P. O. Box 808, Farmington, New Mexico 874

DESCRIPTION OF WELL AND LEASE

Lease Name WILSON	Well No. 2	Pool Name, <del>Leasing</del> Formation <del>CHACRA</del>	Kind of Lease State, Federal or Fee FED NM	Lea 071
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Location  
Unit Letter G ; 1635 Feet From The NORTH Line and 1550 Feet From The EAST  
Line of Section 31 Township 29 NORTH Range 10 WEST , NMPM, SAN JUAN C

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Southern Union Gathering Co.	First International Building Dallas, Texas 75201
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
G 31 29N 10W	YES 7/7/80

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff.
		XX	XX					
Date Spudded 02/27/80	Date Compl. Ready to Prod. 05/15/80	Total Depth 3052	P.B.T.D. 3011					
Elevations (DF, RKB, RT, GR, etc.) 5593 RKB	Name of Producing Formation CHACRA	Top Oil/Gas Pay 2770	Tubing Depth 2728					
Perforations			Depth Casing Shoe 3052					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
9-7/8	7-5/8 26.4#	203	85
6-3/4	4-1/2 9.5#	3052	350
	2-1/16 IJ 3.25#		

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 to be able 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 (pilot, 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

(Signature)  
Vice-President

(Title)  
6/11/82

OIL CONSERVATION COMMISSION

APPROVED JUL 23 1982, 19\_\_

BY Original Signed by Jeff Edmister

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 de well, this form must be accompanied by a tabulation of the de tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for able on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of co