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SANTA FE		CONSERVATION COMMISSION	Form C-104
FILE	REQUES	T FOR ALLOWABLE	Supersedes Old C-104 an
u.s.g.s.	ALITHORIZATION TO THE	AND	Effective 1-1-65
LAND OFFICE	AUTHORIZATION TO TR	RANSPORT OIL AND NATURAL	. GAS
TRANSPORTER GAS	_		
OPERATOR		<u> </u>	
PROPATION OFFICE		i de Maria	111231982
Operator			
Union Texas Petrole	eum Corporation		OIL COM 3
1860 Lincoln Street Reason(s) for filing (Check proper b)	t, Suite 1010, Denver, Co		Dis
New We!1	•	Other (Please explain)	h * .
Recompletion	Change in Transporter of: Oil Dry C	Change of Armo	renip to ng Company successor to
Change in Ownership X	 	densate Supron Energy	0 1 3
If change of ownership give name and address of previous owner	Supron Energy Corporation	on, P. O. Box 808, Farmi	ngton, New Mexico 87401
I. DESCRIPTION OF WELL ANI	D LEASE Well No.; Pool Name, Including	Formation Vinda/La	
SUMMIT	11 BLOOMFIELD	· · · · -	04701
Location	1 11 BLOOMFIELD	CHACRA EXT State, Fede	eral or Fee FED SF 04701
	1575	1500	WEST
1	1575 Feet From The SOUTH L	ine and 1520 Feet From	n The
Line of Section 34 T	'ownship29 NORTH Range	11 WEST , NMPM, SAN	JUAN Cou
Name of Authorized Transporter of C	RTER OF OIL AND NATURAL G		roved copy of this form is to be sent)
		Tradition (ofter dauless to which appli	roved copy of this form is to be sent)
Name of Authorized Transporter of C	asinghead Gas or Dry Gas X	Address (Give address to which app	roved copy of this form is to be sent)
Southern Union Gath	nering Co.	First International B	uilding
If well produces oil or liquids,	Unit Sec. Twp. P.ge.		/hen
give location of tanks.	K 34 29N 11N	W YES	06/29/81
If this production is commingled v. COMPLETION DATA	with that from any other lease or pool	, give commingling order number:	
Designate Type of Complet	ion - (X) Oil Well Gas Well XX	New Well Workover Deepen	Plug Back Same Restv. Diff. R
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
02/17/81	30/19/81	2965	2931
Elevations (DF, RKB, RT, GR, etc.,	ł.	Top Oil/Gas Pay	Tubing Depth
5646 RKB	CHACRA	2751	NO TUBING
Perforations	0751 0757		Depth Casing Shoe
	2751 - 2757		2962
1015575		ND CEMENTING RECORD	
9-7/8	7-5/8 29.7#	268	SACKS CEMENT
6-1/2	2-7/8 6.5#	2962	200 550
0 1/2	2 770 0:37	2302	550
. TEST DATA AND REQUEST 1	FOR ALLOWABLE (Test must be	after recovery of total volume of load oi	l and must be equal to or exceed top a
OIL WELL	able for this d	lepth 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
			<u> </u>
Actual Prod. During Test	Oil-Bhis.	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
CERTIFICATE OF CONTRACT	YCE	1	
. CERTIFICATE OF COMPLIA!	NUE	OIL CONSERV	ATION COMMISSION
I hereby consider that the autor	I regulations of the Oil Comment	APPROVED JUL	2 9 1000
Commission have been complied	I regulations of the Oil Conservation with and that the information given	Original Staged b	
above is true and complete to the	ne best of my knowledge and belief.	BY	<u> </u>
Union Texas Petrole	eum Corporation	# DEPUTY OIL & GAS	INSPECTOR, DIST.

Vice - President

6-11-82

(Title)

TITLE .

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepe well, this form must be accompanied by a tabulation of the deviatests taken on the well in accordance with RULE 111.

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

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

