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SANTA FE			
FILE			
U.S.G.S.			<u> </u>
LAND OFFICE			
TRANSPORTER	OIL	<u> </u>	
TRANSFORT EN	GAS	<u> </u>	
OPERATOR			
PRORATION OFFICE			
Operator			
Union Tex	as Pe	tro	leı
Address			
1960 Tina	01n 9	tra	a+

ļ	DISTRIBUTION SANTA FE	-	ONSERVATION COMMISSION FOR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-11: Effective 1-1-65	
	U.S.G.S.	AUTHORIZATION TO TRAN	AND NSPORT OIL AND NATURAL	GAS	
	LAND OFFICE				
	TRANSPORTER GAS				
	OPERATOR		i		
,	PRORATION OFFICE		· · · · · · · · · · · · · · · · · · ·	1004	
*-	Operator			14,20	
	Union Texas Petroleum Corporation Address			1 0/0 × 0 000 /	
	1860 Lincoln Street, Suite 1010, Denver, Colorado 80295				
	Reason(s) for filing (Check proper box) Other (Please explain)				
	New Well	Change in Transporter of:	Change of Owner		
	Recompletion	Oil Dry Gas			
	Change in Ownership X	Casinghead Gas Condens	sate Gupron Energy	- Corporation	
	If change of ownership give name Sand address of previous owner	upron Energy Corporation			
	Lease Name	Well No. Pool Name, Including Fo	rmation Kind of Lea	se Lease No. 047020 B	
	Congress	6-E Bloomfield C	nacra EXL. State, Feder	ral or Fee Cu B.1.	
	Location 0 99	OO South	1790 Feet From	East	
	Unit Letter;	20N 11	W San	Juan County	
	Line of Section 35 Tow	mship ZJN Range II	, NMPM,	County	
III.	DESIGNATION OF TRANSPORT	or Condensate	S Address (Give address to which appr	oved copy of this form is to be sent)	
	1	Southern Union Gathering Co. Address (Give address to which approved copy of this form is to be sent) First International Building Dallas, Texas 75201			
		Unit Sec. Twp. Ege.	Dallas, Texas 75201 Is gas actually connected?	Then	
	If well produces oil or liquids, give location of tanks.		Yes	12/14/81	
	If this production is commingled wit	h that from any other lease or pool,	give commingling order number:		
	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
	Designate Type of Completion	on - (X)	! !	P.B.T.D.	
	Date Spudded 3/14/81	Date Compl. Ready to Prod. 6/3/81	Total Depth 6563	6522	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
	5730 R.K.B.	Chacra	2834	No Tubing Depth Casing Shoe	
	Perforations 2834-2948			6563'	
		TUBING, CASING, AND	CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	12½"	8 5/8", 32.00#	290'	200	
	7 7/8"	4 ¹ 2", 10.50#	6563'	1250 (3 stages)	
				il and must be equal to or exceed top allows	
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a) able for this de	fter recovery of total volume of load o pth or be for full 24 hours)	il and must be equal to or exceed top allow-	
	OIL WELL 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 COMPLIAN	FIGATE OF COMPLIANCE OIL CONSERVATION COMMISSION			
4 1	. Juliu ioniu oi oomi man		APPROVED JUL 2 3 1982 . 19		
	I hereby cartify 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		Original Signed by FRANK T. CHAVEZ		
			SUPERVISO	OR DISTRICT # 3	
	Imion Texas Petrole	mii cor.hor.g cron	TITLE		

Vice - President	
6 10 BZ (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.