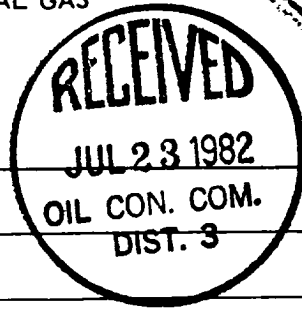


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| | GAS |
| OPERATOR | |
| PRORATION OFFICE | |

**NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**

Form C-104
Supersedes Old C-104 and C-11
Effective 1-1-65



I. 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 to~~
~~Union Producing Company Successor to~~
~~Supron Energy Corporation~~

If change of ownership give name and address of previous owner Supron Energy Corporation, P.O. Box 808, Farmington, New Mexico 87401

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|----------------------|---|---|----------------------------|
| Lease Name McCord | Well No. 5 | Pool Name, including Formation Basin Dakota | Kind of Lease State, Federal or Fee Fed SF | Lease No. 078214 |
| Location Unit Letter N ; 1050 Feet From The South Line and 1450 Feet From The West Line of Section 27 Township 30N Range 13W , NMPM, San Juan County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | | | |
|---|---|-------------------|---------------------|--------------------|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Plateau, Inc. | Address (Give address to which approved copy of this form is to be sent) P. O. Box 108, Farmington, NM 87401 | | | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Southern Union Gathering Co. | Address (Give address to which approved copy of this form is to be sent) 1800 First International Building Dallas, TX 75201 | | | |
| If well produces oil or liquids, give location of tanks. | Unit N | Sec. 27 | Twp. 30N | Rge. 13W |
| | Is gas actually connected? Yes | | When 4/63 | |

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

IV. COMPLETION DATA

| | | | | | | | | |
|---|--|--------------------------------|-----------------------------|----------------------------------|--------|-----------|-------------|--------------|
| Designate Type of Completion - (X) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Resrv. | Diff. Resrv. |
| | | X | | | | | | |
| Date Spudded 12/8/62 | Date Compl. Ready to Prod. 12/19/62 | Total Depth 6425 | P.B.T.D. 6387 | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 5662 G.L. | Name of Producing Formation Basin Dakota | Top Oil/Gas Pay 6178 | Tubing Depth 6211 | | | | | |
| Perforations 6358-6342, 6290-6268, 6252-6245, 6198-6178 | | | | Depth Casing Shoe 6423 | | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | | SACKS CEMENT | | | | |
| 12 1/4" | 8 5/8" | 253 | | 170 | | | | |
| 7 7/8" | 4 1/2" | 6413 | | 300 | | | | |
| | 1 1/2" | 6201 | | | | | | |

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 top allowable 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 (pitot, 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)
6/10/82

(Date)

OIL CONSERVATION COMMISSION

APPROVED **JUL 23 1982**, 19____
 BY **Original Signed by Jeff Edmister**
DEPUTY OIL & GAS INSPECTOR, DIST. #3
 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 multiple completed wells.