

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF TANKS DESIGNED	
DISTRIBUTION	
SANTA FE	
PH.P.	
U.S.O.B.	
LAND OFFICE	
TRANSPORTER	OIL
	NAT.
OPERATOR	
PRODUCTION OFFICE	
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)

If change of ownership give name  
and address of previous owner

## DESCRIPTION OF WELL AND LEASE

Lease Name Culpepper Martin	Well No. 4M	Pool Name, Including Formation Blanco Mesaverde	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location					
Unit Letter <u>J</u> ; <u>1720</u> Feet From The <u>South</u> Line and <u>1725</u> Feet From The <u>East</u>					
Line of Section <u>6</u> Township <u>31N</u> Range <u>12W</u> , NMPM, <u>San Juan</u> County					

## DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Plateau, Inc.	POB 159, Sullivan Rd., Littlefield, NM 87413
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 Company	POB 3308, Albuquerque, NM 87190
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	<u>J</u> <u>6</u> <u>31N</u> <u>12W</u> <u>No</u>

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. Res'v.
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudded 8/27/1981	Date Compl. Ready to Prod. 2/27/1982	Total Depth 7100'	P.B.T.D. 7070'					
Elevations (DF, RKB, RT, GR, etc.) 5915' GL	Name of Producing Formation Point Lookout & Mesaverde	Top Oil/Gas Pay 4521'	Tubing Depth 4162'					
Perforations 4521-25, 76-82, 4614-20, 4624-32, 38-42, 47-54, 4705-12, 36-45, 64-69, 70-90, 4804-10, 50-62			Depth Casing Shoe 7076'					

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
13-3/4"	10-3/4" csg	372	250
9-7/8"	7-5/8" csg	4498	950
6-3/4"	5-1/2" liner	7076	300
---	2-3/8" tbg	4162	---

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 (if low, pumpjack, 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 2820	Length of Test 3 hrs	Bbls. Condensate/MMCF ---	Gravity of Condensate ---
Testing Method (pilot, back pr.) back pressure	Tubing Pressure (shut-in) 763#	Casing Pressure (shut-in) 765#	Choke Size 3/4"

## CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Thomas C. Belsha (Signature)  
Division Petroleum Engineer  
(Title)

March 29, 1982

(Date)

## OIL CONSERVATION DIVISION

APPROVED \_\_\_\_\_, 19\_\_\_\_

BY Original Signed by FRANK T. CHAVEZ

TITLE SUPERVISOR DISTRICT # 3

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