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	NEW MEXICO OIL (					CONSERVATION COMMISSION				Form C-104	
	FILE					FOR ALLOWABLE				Supersedes Old C-104 and C- Ellective 1-1-65	
	<u> </u>						AND				
	U.S.G.S.					ANSPORT OIL AND NATURAL BAS					
	LAND OFFICE										
	TRANSPORTER OIL										
	GAS										
	OPERATOR										
	PROBATION OFFICE										
I.	Operator Operator										
	Union Texas Petroleum Corporation										
	Union lexas retroleum Corporation Address										
	1860 Lincoln Street,		1010,	Denver, C	olorado	80295					
	Reason(s) for filing (Check proper box)					Other (Please explain)					
	New Well Change in Transporter of:					Change of Ownership to					
	Recompletion Oil Dry Go				Gas	bis Diricon Producing Company Successor to					
	Change in Ownership X Casinghead Gas Conde				densate	nsate Sapron Energy Corporation					
						and a support and by some portion					
	If change of ownership give name Supron Energy Corporation, P. O. Box 808, Farmington, New Mexico 87401										
	and address of previous owner Suproit Energy Corporation, P. U. Box 808, rarmington, New Mexico 87401										
	T 00 T 1										
II.	DESCRIPTION OF WELL AND	LEASE							I-	22-Ind	
	Lease Name Well No. Fool Name, Including Fo						Kind of Leas	se	Ita	Lease No	
	Barker Dome	.2		Barker Cre	ek Dakot	a	State, Feder	al or Fee	Indian	2772	
	Location								<del></del>	.4	
	a h 440	)	_	Nonth		1540			East		
	Unit Letter ; 440	Fest	From The	North	_ine and		Feet From	The			
	Line of Scatter 21 Township 32N Bance 14W Nivibia San Juan County										
	Line of Section 21 Tow	mship	32N	Range	14W	, NMF	M, San c	uan —————		County	
III.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS										
	Name of Authorized Transporter of Oil		r Conden			(Give addres.	s to which appro	oved copy of th	is form is to	be sent)	
	Name of Authorized Transporter of Casinghead Gas or Dry Gas X					Address (Give address to which approved copy of this form is to be sent)					
						First International Building					
	Southern Union Gathe				<u> Dalla</u>	Dallas, Texas 75201					
	If well produces oil or liquids,	'	Sec.	Twp. P.ge.	Is gas a	tuálly conne	cted? W	nen			
	give location of tanks.	' A '	21	32N   14W	Yes	Yes		May 1942			
	If this production is commingled with that from any other lease or pool, give commingling order number:										
	COMPLETION DATA	n that mon	any on	er rease or pot	i, give com	minging ord		<del></del>	<del> </del>		
- • •			Oil We	ll Gas Well	New Well	Workover	Deepen	Plug Back	Same Res	v. Diff. Res	
	Designate Type of Completion - (X)				i f	1	1	1		1	
	Date Spudded	Date Comp	Bendy	10 Prod	Total De	nth.		P.B.T.D	P.B.T.D.		
	-	1	Date Compl. Ready to Prod.			•					
	4-9-42	510-42				2590' Top Oil/Gas Pay		Tubing Depth			
	Elevations (DF, RKB, RT, GR, etc., Name of Producing Formation				Top 011/	Gas Pay		Tubing Dep	Tubing Depth		
	6842 DF Dakota										
	Perforations		Depth Casing Shoe								
	TUBING, CASING, AND					D CEMENTING RECORD					
	HOLE SIZE	CASI			I	DEPTH		S	SACKS CEMENT		
	HOLE SIZE	C 7.31	CASING & TUBING SIZE			312	<u> </u>	<del></del>			
			13"	**		<del></del>		<del></del>			
			10-3/4"			1234		<del></del>			
			8-5/8"			2285		+			
		<u>i</u>	<u>6-5/8</u>			2475		i	<del></del>		
V.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed to									xceed top allo	
- *	OH, WELL able for this depth or be for full 24 hours)										
	Date First New Oil Run To Tanks	Date of Te	31		Producin	Producing Method (Flow, pump, gas lift, etc.)					
	Length of Test	Tubing Pre	ssure		Casing F	Casing Pressure			Choke Size		
		1									
	Actual Prod. During Test	ring Test Cil-Bbls.			Water - B	Water-Bbls.			Gas-MCF		
	Title Control of the										
					1				1		
	GAS WELL					T					
	Actual Prod. Test-MCF/D	Length of Test			Bbla. Co	Bbls. Condensate/MMCF		Gravity of Condensate			
	Testing Method (pitot, back pr.)	Tubing Pre	a) ewaa	hut-in)	Casing F	Casing Pressure (Shut-in)		Choke Size			
<b>17</b>	CERTIFICATE OF COMPLIANCE					011	CONSERV	ATION CO	MMISSION	 J	
VI.	CERTIFICATE OF COMPLIANCE					012	CONSERV				
	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.				ABB5	APPROVED					
					'''					~	
					" By	By Original Stated by Jost Edmister					
						DEPINTY ON S. CAS INCOME.					
	Union Texas Petroleum Corporation				TITLE	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 deepen well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.					
	$\lambda = \frac{1}{2}$										
	(Signature)										
	Vice - President						of this form m				
	(Title)				able o	n new and	recompleted w	elis.	comp.e	,	
	6/10/R2					able on new and recompleted wells.  Fill out only Sections I. II, III, and VI for changes of owns					
	(Da	te)		<del></del>	well n	well name or number, or transporter, or other such change of condition					
	(1)										
						Separate Forms C-104 must be filed for each pool in multip					