|                                   | NO. OF COPIES RECEIVED  |           |        |           |                 |            |             |
|-----------------------------------|---|-----------|--------|-----------|-----------------|------------|-------------|
| ١                                 | DISTRIBUTION SANTA FE FILE                                    |           |        |           |                 | NEW MEX    | ICO OIL C   |
|                                   |   |           |        |           | REQUEST         |            |             |
|                                   |   |           |        |           |                 |            |             |
| U.\$.G.5.                         |   |           |        | AUTHO     | DRIZATIO        | N TO TRA   |             |
|                                   | LAND OFFICE   |           |        |           |                 |            |             |
| TRANSPORTER                       | OIL   |           |        |           |                 |            |             |
|                                   | TRANSPORTER   | GAS       |        |           |                 |            |             |
|                                   | OPERATOR  |           |        |           |                 |            |             |
| PRORATION OFFICE                  |   |           |        |           |                 |            |             |
| ľ                                 | Operator  |           |        |           |                 |            |             |
| Union Texas Petroleum Corporation |   |           |        |           |                 |            | ion         |
| Address                           |   |           |        |           |                 |            | <u> </u>    |
| I                                 | 1860 Lincoln Street, Suite 1010; Denv                         |           |        |           |                 |            |             |
| ŀ                                 | Reason(s) for filing (Check proper box)                       |           |        |           |                 |            |             |
| New Well                          |   |           |        | Change II | Transporter     | r of:      |             |
| Recompletion                      |   |           |        |           | Oil             |            | Dry Go      |
| ŀ                                 | Change in Ownership X   |           |        |           | Casinghe        | ad Gas     | Conder      |
|                                   | Change in Ownership   |           |        |           |                 |            |             |
|                                   | If change of owners<br>and address of prev                    | hip giv   | vner . |           |                 | Energy C   | orporat:    |
|                                   | If change of owners<br>and address of prev<br>DESCRIPTION O   | hip giv   | vner . |           | ASE             | Energy C   |             |
|                                   | If change of owners<br>and address of prev                    | hip giv   | vner . |           | ASE             | Pool Name, |             |
|                                   | If change of owners<br>and address of prev<br>DESCRIPTION O   | hip giv   | vner . |           | ASE<br>Well No. | Pool Name, | Including F |
|                                   | If change of owners and address of previous Name USA Location | thip give | L A    | ND LE     | Well No.        | Pool Name, | Including F |

| 1    | DISTRIBUTION  | NEW MEXICO OIL C  | ONSERVATION COMMISSION   | Form C=104  |  |  |  |  |  |
|------|---|---|--|---|--|--|--|--|--|
|      | SANTA FE  | <b>–</b>  | FOR ALLOWABLE  | Supersedes Old C-104 and C-110                                |  |  |  |  |  |
| ı    | FILE  | ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~                                     | AND  | Effective 1-1-65  |  |  |  |  |  |
|      | U.\$.G.5.   | AUTHORIZATION TO TRA  | ANSPORT OIL AND NATURAL (  | 245   |  |  |  |  |  |
|      | LAND OFFICE   | _ AUTHORIZATION TO TRA  | THE AREA THE THE   |   |  |  |  |  |  |
|      | TRANSPORTER OIL GAS   | <del>-</del>  -   |  |   |  |  |  |  |  |
|      | OPERATOR  |   |  |   |  |  |  |  |  |
|      | PRORATION OFFICE  | 7   |  |   |  |  |  |  |  |
| 1.   | Operator  |   |  | 000   |  |  |  |  |  |
|      | Union Texas Petroleum Corporation   |   |  |   |  |  |  |  |  |
|      | Address   | Street, Suite 1010; Denve   | er. Colorado 80295   | 1960  |  |  |  |  |  |
|      | Reason(s) for filing (Check proper bo   |   | Other (Please explain)   | 1 ON  |  |  |  |  |  |
|      | New Well  | Change in Transporter of:   |  |   |  |  |  |  |  |
|      | Recompletion  | Oil Dry Ga  | ıs 🗍   | ***************************************                       |  |  |  |  |  |
|      | Change in Ownership X   | Casinghead Gas Conder   | nsate  |   |  |  |  |  |  |
|      | Change in Curicismp 23  |   |  |   |  |  |  |  |  |
|      | If change of ownership give name and address of previous owner  | Supron Energy Corporat:   | ion; P. O. Box 808; Farm   | nington, New Mexico 87401                                     |  |  |  |  |  |
| II.  | DESCRIPTION OF WELL AND   | Well No. Pool Name, Including F   | ormation   Kind of Leas  | Lease No.   |  |  |  |  |  |
|      | Lease Name  | 1 1   |  | lor Fee Federal SF-078818A                                    |  |  |  |  |  |
|      | USA   | 1 Blanco Mesave:  | rde State, 1 sans  | rederal Sr-076616A  |  |  |  |  |  |
|      | Location  |   | 201  | 774   |  |  |  |  |  |
|      | Unit Letter P : 81  | 2 Feet From The South Lin   | ne and 804 Feet From   | The East  |  |  |  |  |  |
|      |   | 20.17.41  | 40.17 4  | To an   |  |  |  |  |  |
|      | Line of Section 24 To   | ownship 32 North Range  | 13 West , NMPM, Sar  | Juan County   |  |  |  |  |  |
|      |   |   |  |   |  |  |  |  |  |
| III. | DESIGNATION OF TRANSPOR   | RTER OF OIL AND NATURAL GA  | Address (Give address to which appro   | ved copy of this form is to be sent)                          |  |  |  |  |  |
|      |   | in La Ur Condensate   | P. U. Box 489;   | 97/13   |  |  |  |  |  |
|      | Plateau, Inc.   | asinghead Gas or Dry Gas A  | Bloomfield, New Mexico   | ved copy of this form is to be sent)                          |  |  |  |  |  |
|      | Name of Authorized Transporter of C   |   | 1800 First Internation   | ved copy of this form is to be sent) nal Bldg.; Dailas, Texas |  |  |  |  |  |
|      | Southern Union Gather   | ing Company   | 75270 Attn: Mr. R. J   |   |  |  |  |  |  |
|      | If well produces oil or liquids,  | Unit Sec. Twp. Pge.   | No No  | en.   |  |  |  |  |  |
|      | give location of tanks.   | P 24 32N 13W  | 1  |   |  |  |  |  |  |
|      | If this production is commingled w  | with that from any other lease or pool,                                   | give commingling order number:   |   |  |  |  |  |  |
|      | COMPLETION DATA   |   |  | Plug Back   Same Res'v. Diff. Res'v.                          |  |  |  |  |  |
|      | Designate Type of Complet   | ion - (X)   | New Well Workover Deepen   | Frag Back Same res vi assistante                              |  |  |  |  |  |
|      | Designate Type of Complete  |   | Total Depth  | P.B.T.D.  |  |  |  |  |  |
|      | Date Spudded  | Date Compl. Ready to Prod.  | Total Depth  | 1   |  |  |  |  |  |
|      |   | Name of Producing Formation   | Top Oil/Gas Pay  | Tubing Depth  |  |  |  |  |  |
|      | Elevations (DF, RKB, RT, GR, etc.)  | Name of Floducing 1 children  | ,  |   |  |  |  |  |  |
|      | Desferations  |   |  | Depth Casing Shoe   |  |  |  |  |  |
|      | Perforations  |   |  |   |  |  |  |  |  |
|      |   | TURING CASING AN  | D CEMENTING RECORD   |   |  |  |  |  |  |
|      |   | CASING & TUBING SIZE  | DEPTH SET  | SACKS CEMENT  |  |  |  |  |  |
|      | HOLE SIZE   | CASING & FOBING SIZE  |  |   |  |  |  |  |  |
|      |   |   |  |   |  |  |  |  |  |
|      |   |   |  |   |  |  |  |  |  |
|      |   |   |  |   |  |  |  |  |  |
|      |   |   |  | and much be equal to or exceed top allows                     |  |  |  |  |  |
| 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 top allowable for this depth or be for full 24 hours) |   |  |   |  |  |  |  |  |
|      | OIL WELL Date First New Oil Run To Tanks  | Date of Test  | Producing Method (Flow, pump, gas li   | ift, etc.)  |  |  |  |  |  |
|      | Date First New Oil Run to Tanks   | 54.6 5. 755   |  |   |  |  |  |  |  |
|      |   | Tubing Pressure   | Casing Pressure  | Choke Size  |  |  |  |  |  |
|      | Length of Test  | I dbing ! 1000 mg   |  |   |  |  |  |  |  |
|      | Actual Prod. During Test  | Oil-Bbls.   | Water-Bbls.  | Gas - MCF   |  |  |  |  |  |
|      | Actual Prod. During 1991  |   |  |   |  |  |  |  |  |
|      | l   |   |  |   |  |  |  |  |  |
|      |   |   | •  |   |  |  |  |  |  |
|      | Actual Prod. Test-MCF/D   | Length of Test  | Bbls. Condensate/MMCF  | Gravity of Condensate   |  |  |  |  |  |
|      | Actual Prod. 1001-MC1/D   |   |  |   |  |  |  |  |  |
|      | The state of the back project   | Tubing Pressure (Shut-in)   | Casing Pressure (Shut-in)  | Choke Size  |  |  |  |  |  |
|      | Testing Method (pitot, back pr.)  |   | •  |   |  |  |  |  |  |
|      |   |   | OIL CONSERV  | ATION COMMISSION  |  |  |  |  |  |
| VI.  | CERTIFICATE OF COMPLIA  | NCE   |  |   |  |  |  |  |  |
|      |   |   | APPROVED UCI 18  | 1982  |  |  |  |  |  |
|      |   | d regulations of the Oil Conservation with and that the information given | And the second s |   |  |  |  |  |  |
|      | above is true and complete to t   | he best of my knowledge and belief.                                       | BY C L Pleas Of Comment  |   |  |  |  |  |  |
|      |   | AS PETROLEUM  | TITLE  | <u>(1)</u> 3  |  |  |  |  |  |
|      | On the least  |   |  |   |  |  |  |  |  |

Rudy D. Motto (Signature Field Operations Manager (Title)

(Date)

October 14, 1982

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.