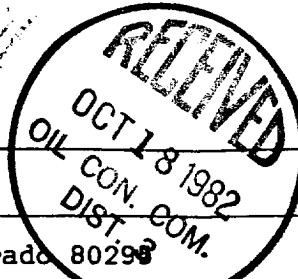


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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

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

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



I. Operator
Union Texas Petroleum Corporation

Address
1860 Lincoln Street, Suite 1010, Denver, Colorado 80298

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~~
~~Unicon Producing Company~~
~~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 Payne	Well No. 3-A	Pool Name, including Formation ✓ Blanco Mesaverde	Kind of Lease State, Federal or Fee Com. w/SF	Lease 080517
Location Unit Letter <u>D</u> : <u>790</u> Feet From The <u>North</u> Line and <u>980</u> Feet From The <u>West</u> Line of Section <u>20</u> Township <u>32 North</u> Range <u>10 West</u> , NMPM, San Juan				

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) Post Office Box 108, Farmington, NM 87401	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Southern Union Gas Gathering Co.	Address (Give address to which approved copy of this form is to be sent) 1800 First International Bldg. Dallas, Texas 75201	
If well produces oil or liquids, give location of tanks. Unit <u>D</u> Sec. <u>20</u> Twp. <u>32N</u> Rge. <u>10W</u>	Is gas actually connected? Yes	When 8/20/80

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

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. R
		XX	XX					
Date Spudded 4/5/80	Date Compl. Ready to Prod. 5/27/80		Total Depth 7595		P.B.T.D. 7550			
Elevations (DF, RKB, RT, GR, etc.) 6098	Name of Producing Formation Mesaverde		Top Oil/Gas Pay 4761		Tubing Depth 5267			
Perforations 4761 - 5294					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13-3/4"	10-3/4"		279		235			
9-7/8"	7-5/8"		3160		290			
6-3/4"	5-1/2"		3010-7564		500			
	3-1/16"		5267					

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 of hole 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 (pilot, 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

JUL 23 1982

APPROVED _____, 19____

BY Jeff Edmister

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 deep well, this form must be accompanied by a tabulation of the devils tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of oil well name or number, or transporter, or other such change of conditions.

Separate Forms C-104 must be filed for each pool in multiple completions.