| | | _ | | | |
|------|--|--|---|----------------------------------|--|
| 1 | MO. OF COPIES RECEIVED | | | | |
| | DISTRIBUTION | NEW MEXICO OIL C | ONSERVATION COMMISSION | Form C-104 | |
| | SANTA FE | | FOR ALLOWABLE | Supersedes Old C-104 and | |
| | FILE | | AND | Effective 1-1-65 | |
| | u.s.g.s. | AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS TO THE REPORT OF THE PARTY OF THE PA | | | |
| | LAND OFFICE | | | | |
| | TRANSPORTER OIL | | , | | |
| | OPERATOR GAS | | S. J. | and the second second | |
| | PROBATION OFFICE | - | S. Harris | | |
| 1. | Operator | <u> </u> | | | |
| | Union Texas Petroleu | m Corporation | . 🧃 | Digital State 1 | |
| | Address | | | | |
| | 1860 Lincoln Street, Suite 1010, Denver, Colorado 80295 | | | | |
| | Reason(s) for filing (Check proper box) | | Other (Please explain) Change of Oumore | hip to | |
| | New We!l | Change in Transporter of: Oil Dry Ga | Hnicon Producing | - | |
| | Change in Ownership X | Casinghead Gas Conder | Grand Form | rporution | |
| | Change in Owner shape | Cosmigned Gds Conden | | | |
| | CESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Kind of Lease Kind of Lease | | | | |
| | Lease Name | | \$ | | |
| | Taliferro | 4-E Blanco Me | esaverde side, reder | olor Fee Federal SF 078244 | |
| | | North Lin | 1850 | _ West | |
| | Unit Letter;; | Feet From TheLin | e and Feet From | The | |
| | Line of Section 29 Tow | waship 31 North Range | 12 West , NMPM, San | n Juan - Soun | |
| | | | | | |
| III. | DESIGNATION OF TRANSPORT | TER OF OIL AND NATURAL GA | | | |
| | Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent, | | | | |
| | Plateau, Inc. P. O. Box 108, Farmington, NM 87401 Name of Authorized Transporter of Casinghead Gas or Dry Gas (T) Address (Give address to which approved a | | | | |
| | Southorn Union Cathering Co. 1800 First International Building | | | al Building | |
| | Lint Sec Two Pee I was equally considered. When | | | hen | |
| | If well produces oil or liquids, give location of tanks. | C 29 31N 12W | • | 04-02-81 | |
| 1 | If this production is commingled wit | | *· | | |
| | COMPLETION DATA | | | | |
| | Designate Type of Completion | Oil Well Gas Well | New Well Workover Deepen | Plug Back Same Res'v. Diff. Re | |
| | | Date Compl. Ready to Prod. | Total Depth | 1 | |
| | Date Spudded 07-14-80 | 02-07-81 | 7071' MD | 7010' MD | |
| | Elevations (DF, RKB, RT, GR, etc., | Name of Producing Formation | Top Oll/Gas Pay | Tubing Depth | |
| | 6030' GR | Mesaverde | 4717' | 4698' | |
| | Perforations | 4832 | 2, 56,71,86, 4910, 12,30 | Depth Casing Shoe | |
| | 4717, 19,22,28,35 | 5,39,50,54,61,74,82,85,92 | 2,94,96,98, 4806, | 7040' | |
| | | TUBING, CASING, AND | CEMENTING RECORD | | |
| | HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT | |
| | 12½" | 8 5/8" | 335.8' | 250 Sx Class B | |
| | 7 7/8" | 5½" 1½" | 7040 ' 4698 ' | 1495 Sx 50/50 Poz | |
| | | 1-4 | 4070 | | |
| v | TEST DATA AND REQUEST FO | 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 a | | | |
| ٧. | OIL WELL | able for this de | pth or be for full 24 hours) | | |
| | Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow, pump, gas l | ift, etc.) | |
| | | Tubing Pressure | Casing Pressure | Choke Size | |
| | Length of Test | , deling p. salam | Cdamy Pressure | Chore size | |
| | Actual Prod. During Test | Oil-Bbls. | Water-Bbis. | Gas-MCF | |
| | , | | | | |
| | | | | | |
| | GAS WELL | | | | |
| | Actual Prod. Test-MCF/D | Length of Test | Bbis. Condensate/MMCF | Gravity of Condensate | |
| | | | | 100000 | |
| | Testing Method (pitot, back pr.) | Tubing Pressure (Shut-in) | Cosing Pressure (Shut-in) | Choke Size | |
| _ | | 1 | | 171011 601111111 | |
| ٧١. | I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given | | OIL CONSERV | OIL CONSERVATION COMMISSION | |
| | | | APPROVED | | |
| | | | | | |
| | above is true and complete to the | best of my knowledge and belief. | 1) | | |
| | Union Toyas Potnolau | m Componation | II DEDITY OU S CAG | INSPECTOR DIST #8 | |

Vice - President

6-11-82

If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviati tests taken on the well in accordance with RULE 111.

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

This form is to be filed in compliance with RULE 1104.

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