

OIL CONSERVATION DIVISION

P. O. BOX 2000

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

| | |
|------------------------|--|
| NO. OF COPIES REQUIRED | |
| DISTRIBUTION | |
| SANTA FE | |
| FILE | |
| U.S.G. | |
| LAND OFFICE | |
| TRANSPORTER | |
| OPERATOR | |
| PRODUCTION OFFICE | |

Operator
UNION TEXAS PETROLEUM CORPORATIONAddress
1860 Lincoln Street, Suite 1010, Denver, Colorado 80295

Reason(s) for filing (Check proper box)

| | | | |
|---------------------|-------------------------------------|---------------------------|--------------------------|
| New Well | <input checked="" type="checkbox"/> | Change in Transporter of: | |
| Recompletion | <input type="checkbox"/> | Oil | <input type="checkbox"/> |
| Change in Ownership | <input type="checkbox"/> | Casinghead Gas | <input type="checkbox"/> |
| | | Dry Gas | <input type="checkbox"/> |
| | | Condensate | <input type="checkbox"/> |

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. 1A | Pool Name, Including Formation Blanco Mesaverde | Kind of Lease State, Federal or Fee | Fee | Lease No. |
| Location | | | | | |
| Unit Letter | G | 1850 | Feet From The | East | Line and |
| | | 1850 | Feet From The | North | |
| Line of Section | 31 | Township | 32N | Range | 12W |
| | | | NMPM, | San Juan | 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 |
| | G | 31 | 32N | 12W | No | |

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. |
| | | X | X | | | | | |
| Date Spudded | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. | | | | | |
| 8/8/81 | 1/29/82 | 7100' | 7055' | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Top Oil/Gas Pay | Tubing Depth | | | | | |
| 5842' GL | Point Lookout (Mesaverde) | 4028' | 4150' | | | | | |
| Perforations | | | Depth Casing Shoe | | | | | |
| 4213-41, 4554-93, 4601-92, 4729-93, 4801-08 | | | 7098' | | | | | |

TUBING, CASING, AND CEMENTING RECORD

| | | | |
|-----------|----------------------|------------|--------------|
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| 13-1/2" | 10-3/4" csg | 376' | 250 |
| 9-7/8" | 7-5/8" csg | 4415' | 1200 |
| 6-3/4" | 5-1/2" liner | 4250-7098' | 300 |
| --- | 2-3/8" tbg | 4150' | --- |

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 (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 |
| 3044 | 3 hrs | --- | --- |
| Testing Method (pilot, back pr.) | Tubing Pressure (shut-in) | Casing Pressure (shut-in) | Choke Size |
| back pressure | 901# | 896# | 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

March 11, 1982

(Date)

OIL CONSERVATION DIVISION

APPROVED MAY 3 1982, 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 allow-
able 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.