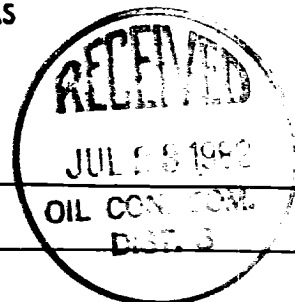


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| LAND OFFICE            |     |  |
| TRANSPORTER            | OIL |  |
|                        | GAS |  |
| OPERATOR               |     |  |
| PRODUCTION OFFICE      |     |  |

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

Form C-104  
Supersedes Old C-104 and C-1  
Effective 1-1-85



I. Operator  
Union Texas Petroleum Corporation  
Address  
1860 Lincoln Street, Suite 1010, Denver, Colorado 80295  
Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐  
Recompletion ☐ Casinghead Gas ☐ Condensate ☐  
Change in Ownership ☒ Other (Please explain)  
Change of Ownership to  
Union Producing Company successor to  
Supron Energy Corporation  
If change of ownership give name and address of previous owner  
Supron Energy Corporation, P.O. Box 908, Farmington, New Mexico 87401

II. DESCRIPTION OF WELL AND LEASE  
Lease Name JICARILLA "N" Well No. 1 Pool Name, including Formation OTERO GALLUP Kind of Lease State, Federal or Fee FED Lease No. 418  
Location  
Unit Letter - K : 1850 Feet From The SOUTH Line and 1850 Feet From The WEST  
Line of Section 4 Township 24 NORTH Range 5 WEST , NMPM, RIO ARRIBA County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☐ or Condensate ☒ Plateau, Inc. Address (Give address to which approved copy of this form is to be sent) P. O. Box 108, Farmington, NM 87401  
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Gas Company of New Mexico Address (Give address to which approved copy of this form is to be sent) 1800 First International Building Dallas, TX 75201  
If well produces oil or liquids, give location of tanks. Unit L Sec. 4 Twp. 24N Rge. 5W Is gas actually connected? YES When 8-27-72

IV. COMPLETION DATA  
Designate Type of Completion - (X) Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.  
XX XX  
Date Spudded 7 26 70 Date Compl. Ready to Prod. 8 23 70 Total Depth 7015 P.B.T.D. 6988  
Elevations (DF, RKB, RT, GR, etc.) 6636 RKB Name of Producing Formation GALLUP Top Oil/Gas Pay 5802 Tubing Depth 5982  
Perforations 5802-6002 Depth Casing Shoe 7013  
TUBING, CASING, AND CEMENTING RECORD  
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT  
12-1/4 8-5/8 339 250  
7-7/8 5-1/2 7013 2175 cu ft  
2-1/16 5982

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 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  
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  
(Date) 6/10/82  
OIL CONSERVATION COMMISSION  
JUL 23 1982  
APPROVED \_\_\_\_\_, 19\_\_\_\_\_  
BY Original Signed by Jeff Edmister  
DEPUTY OIL & GAS INSPECTOR, DIST. #3  
TITLE \_\_\_\_\_  
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.