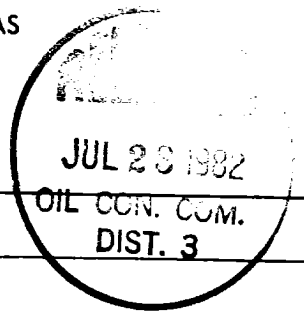


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| LAND OFFICE | | |
| TRANSPORTER | OIL | |
| | GAS | |
| OPERATOR | | |
| PRORATION OFFICE | | |

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

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



I. Operator
Union Texas Petroleum Corporation

Address
1860 Lincoln Street, Suite 1010, Denver, Colorado 80295

Reason(s) for filing (Check proper box)

New Well ☐
Recompletion ☐
Change in Ownership ☒

Change in Transporter of:

Oil ☐ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐

Other (Please explain)

~~Change of Ownership to~~
~~Unicon Producing Company successor to~~
~~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 JICARILLA "J" | Well No. 19 | Pool Name, Including Formation S. BLANCO PICTURED CLIFFS | Kind of Lease State, Federal or Fee FEED | Lease No. 153 |
| Location Unit Letter L ; 1630 Feet From The SOUTH Line and 880 Feet From The WEST Line of Section 36 Township 26 NORTH Range 5 WEST , NMPM, RIO ARRIBA County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | | | | | |
|--|--|-------------------|--------------------|-------------------|--|------------------------|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) | | | | | |
| 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) | | | | | |
| Gas Company of New Mexico | 1800 First International Building Dallas, Texas 75201 | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit L | Sec. 36 | Twp. 26N | Rge. 5W | Is gas actually connected? YES | When 10/2/79 |

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

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 6 27 79 | Date Compl. Ready to Prod. 8 21 79 | | Total Depth 3364 | | P.B.T.D. 3230 | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 6719 RKB | Name of Producing Formation PICTURED CLIFFS | | Top Oil/Gas Pay 3115 | | Tubing Depth --- | | | | |
| Perforations 3115-3171 | | | | Depth Casing Shoe 3261 | | | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | | |
| 9-7/8 | 7-5/8 20.0# | | 224 | | 180 | | | | |
| 6-3/4 | 2-7/8 6.5# | | 3261 | | 175 | | | | |

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 (pitot, 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)

6/11/82

(Date)

OIL CONSERVATION COMMISSION

APPROVED **JUL 23 1982**, 19

BY **Original Signed 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 deepener 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 multistage