NO. OF COPIES RECEIVED				
DISTRIBUTION				
SANTA FE				
FILE				
U.S.G.S.				
LAND OFFICE		-		
TRANSPORTER	OIL			
TRANSPORTER	GAS			
OPERATOR				
PRORATION OFFICE				
Union Texas Petroleu				
1860 Lincoln Street,				

	10:07 (07:12)	→ `		/					
	DISTRIBUTION	NEW MEXICO OIL	CONSERVATION COMMISSION	_					
	SANTA FE	.		Form C-104					
	h	H KEQUESI	FOR ALLOWABLE	Supersedes Old C-104 and C-11					
	FILE	_	AND	Effective 1-1-65					
	U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL	0.4.6					
	LAND OFFICE	- AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL	GAS					
	 	-	•	and the second second second second					
	TRANSPORTER OIL								
	GAS	7	ف ا						
		_							
	OPERATOR			Contract 1					
1.	PRORATION OFFICE		<i>j</i> &	A CO N. I					
ı.	Operator	<u> </u>		3, 3, 1/4					
	1 .		1 4						
	Union Texas Petrole	um Corporation	1	3 11 2 3					
	Address			10,0,1.					
	1	0.11- 4040 D		Jo College					
	1860 Lincoln Street	, Suite 1010, Denver, Col	lorado 80295						
	Reason(s) for filing (Check proper bo	ri	O4h (01						
	1		Other (Please explain)						
	New Well	Change in Transporter of:	_ Change of Owner	ahin ta					
	Recompletion	Oil Dry G							
	1	≒ • • • • • • • • • • • • • • • • • • •	HILCON Producing	s Company successor to					
	Change in Ownership X	Casinghead Gas Conde	nsate Supron Energy C	american him					
				or por dr. roa					
	If change of ownership give name	_							
	and address of previous owner	Supron Energy Corporation	on, P.O. Box 808, Farming	gton. New Mexico 87401					
				ton, new next co of for					
И.	DESCRIPTION OF WELL AND	LEASE							
	Lease Name	Well No. Pool Name, Including F	ormation Kind of Leas	e Lease No.					
	JICARILLA "J"	12 5 51 4100 450	AUGDOG State Federa	- 0					
	JICARILLA "J"	13-E BLANCO MES	SAVERDE State, Federa	of Fee FEB 7 153					
	Location								
	Unit letter A . 940	MODTU	1100	FACT					
	Unit Letter A ; 940	Feet From The NORTH Lir	ne and 1100 Feet From	The EAST					
	26	26 NODTU _ E	UECT DIO	ADDIDA					
	Line of Section 36 To	wnship26 NORTH Range 5	WEST , NMPM, RIO	ARRIBA County					
	PP010114 M1011 OF MP 4110 POP	MED OF OUR AND MARKET OF							
III.		TER OF OIL AND NATURAL GA							
	Name of Authorized Transporter of Oi	l 🔲 or Condensate 🏋	Address (Give address to which appro-	ved copy of this form is to be sent)					
				•					
	Plateau, Inc.		Post Office Box 108	Farmington: NM 87401					
	Name of Authorized Transporter of Ca	singhead Gas or Dry Gas 🔀	Address (Give address to which appro- 1800 First Internation	ved copy of this form is to be sent)					
			1800 First Internation	nal Bldg.					
	Gas Company of New 1		Dallas Texas 75201						
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Who	en					
	give location of tanks.	A 36 26N 5W	YES	5/6/81					
	4.00	A JOU LOW JW	ILO						
	If this production is commingled wi	th that from any other lease or pool,	give commingling order number						
	COMPLETION DATA	the that from any other rease or poor,	give comminging order number.						
1 V .	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen						
	Designate Type of Completi		New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.					
	Designate Type of Completi	on = (X)	XX !	i i i					
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	155m5 1- 1					
	Date Spaaded	Date Compi. Reddy to Piod.	Total Depth	P.B.T.D.					
	10 17 80	1 29 81	7624	7589					
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation							
	Lievations (DF, AAB, A1, GR, etc.)		Top Oil/Gas Pay	Tubing Depth					
	6675 RKB	MESAVERDE	4841						
	Perforations			Double Crede - Share					
	4841-5362		Depth Casing Shoe						
	4041-330	12		7624					
		TUBING CASING AND	CEMENTING RECORD						
	= 5175		T	T					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
	12-1/4	8-5/8 24.0#	273	200					
	7-7/8	4-1/2 10.5#	7624	1080 (3 stages)					
				† ·					
		<u> </u>	-	<u> </u>					
V.	TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a	fter recovery of total volume of load oil	and must be equal to or exceed top allow-					
	OIL WELL		epth or be for full 24 hours)						
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lij	6 -4- 1					
	Date Liter New Oil Wall to James	Date of 1661	Producing Method (From, pump, gas ti)	i, eic.)					
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size					
	2004		, , , , , , , , , , , , , , , , , , , ,	5525					
			1	'					
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas - MCF					
	l <u> </u>		L	<u></u>					
									
	CAC WELL								
	GAS WELL			·					
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate					
		 	+						
ļ	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size					
			1						
1	<u> </u>	<u> </u>							
VI.	CERTIFICATE OF COMPLIAN	CE	OIL CONSERVA	TION COMMISSION					
			APPROVED JUL 2 3 1082 . 19 19						
	I hereby certify that the rules and	regulations of the Oil Conservation							
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		Original Signed by (ARLES GHOLSON					
above is true and complete to the best of my knowledge and belief. Union Texas Petroleum Corporation		BY	Oliginal Signed by CHARLES GROESON						
		TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3							
					Tonion reads retroted to corporation				
This form is to be filed in compliance with RULE 110 If this is a request for allowable for a newly drilled or				compliance with RULE 1104.					
				able for a newly drilled or deepened					
		ature)	well, this form must be accompa-	nied by a tabulation of the deviation					
Vice Percident			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.						
Vice - President (Signature) Vice - President (Title)									
		•				apid on her and recompleted no	Fill out only Sections I, II, III, and VI for changes of owner,		
						6/11/82		1)	. III, and VI for changes of owner.
			6/11/82	nte)	Fill out only Sections I, II	, III, and VI for changes of owner, er, or other such change of condition.			
	6/11/82		Fill out only Sections I, II well name or number, or transport						