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<u> </u>		NEW MEXICO OIL CONSERVATION COMMISSION Form C-104					
SANTA FE		REQUES	T FOR AL	LOWABLE		5	upersedes Old C-104 and (
FILE			AND			E	diective 1-1-65
U.S.G.S.		AUTHORIZATION TO TR	RANSPOR	T OIL AND E	JATURAL	GAS	
LAND OFFICE				. 0.2,	OILINE	UAS	
I RANSPORT ER OIL							
GAS	5					بعيبيد	And the contract of the contra
OPERATOR						A STATE !	The state of the s
TROUGHTION OFFICE							
I. Uperator						<u> </u>	
i '		0					,
Union Texas H	'etroleum	Corporation			_		
Address							
1860 Lincoln	Street, S	Suite 1010, Denver, Co	olorado	80295			
Reason(s) for filing (Check	proper box)			Other (Please	explain)		
New Well		Change in Transporter of:				bip.in .	
Recompletion		OII Dry Gas Unicon Producing Company Success				-aueccasor to	
Change in Ownership X		Casinghead Gas Condensate Suprem Energy Compensation				NA CONTRACTOR OF THE CONTRACTO	
		casinghear Gas [] Cond	ensure				
If change of ownership gi and address of previous o	ve name wner Sup	ron Energy Corporatio	on, P.O.	Box 808,	Farming	ton, Nev	Mexico 97401
II. DESCRIPTION OF WE		•					
Lease Name		Well No. Pool Name, including	Formation	1	Kind of Leas	e	Lease No
Seymour		8-A Blanco Mesa	İ	State, Feder	olor Feepaa	eral SF 078505	
Location		10-41 Dittiled Liebt	yerac		· · · · · · · · · · · · · · · · · · ·	red	erar 5F 076505
.	1500	Conth		000		_	
Unit Letter 1	_;	Feet From The South Li	ine and	900	_ Feet From	The Ea	st
1, 45 , 37	- ,	27 37 41 5	0.77		_	_	
Line of Section 14	Townsh	up 31 North Range	9 West	, ИМРМ,	San	Juan	County
		R OF OIL AND NATURAL G					
Name of Authorized Transp	orter of OII	or Condensate 💢	1				his form is to be sent:
Plateau, Inc.				Box 108,			
Name of Authorized Transp	orter of Casing	need Gas or Dry Gas X	Addies 1	Give address to	which appro	ved copy of t	his form is to be sent)
Southern Unio	n Gatheri	ng Co.	D=11=	s, TX 7520	rnation	ат витто	ing
	Un	it Sec. Twp. P.ge.	le daz de	tually connected) <u> </u>	en .	
If well produces oil or liqui give location of tanks,	1 -	14 31N 9W	1	Yes	1		175
						11/7,	[13_
	ingled with th	at from any other lease or pool,	give comm	ningling order	number:		
IV. COMPLETION DATA		Oil Well Gas Well	New Well	Workover	Deepen	Plug Back	15- 5 1 lb// 5 1
Designate Type of (Completion -	- (X)	1	, worksver	l Deepen	Prug Back	Same Res'v. Diff. Res'
		SS : SS	XX	_ <u>-</u>		!	<u> </u>
Date Spudded	106	•	Total Dep			P.B.T.D.	
7/29/75		9/22/75	60	010' R,K,B		50	941 '
Elevations (DF, RKB, RT, ϵ	GR. etc., No	me of Producing Formation	Top 011/0	Gas Pay		Tubing Dep	oth
6500'		.Mesaverde	5.5	260 '		61	n10'
Perforations	,					Depth Casi	
5260'-5687'							
		TUBING, CASING, AN	D CENENT	TING BECORD		1 6	<u> </u>
1101 5 5135			LEMENI			т	
HOLE SIZE		CASING & TUBING SIZE	 	DEPTH SET		5/	ACKS CEMENT
15'	<u>'</u>	10-3/4"	- -	341'		302	Σ
8-	3/4"	7"	3	3530'		352	2
1	- /	ner:4-1/2"		393'-Btm:	6010'	310	
		3-1/16" 1 1		616'			
V TEST DATA AND PEO	UEST FOR	ALLOWABLE (Test must be a	_	0			
OIL WELL	CLSI I ON .	able for this de	epth or be fo	y oj total volume or full 24 hours)	e of toda oil t	ind musi be e	qual to or exceed top allow
Date First New Oil Run To	Tenks De	e of Test		Method (Flow,	numn eas lif	t etc.)	
			1	, , , . , ,	, ,	.,,	
Length of Test		oing Pressure	Casing Pr				
Langin of feet	'	and the grant	Cuming Pr	essm•		Choke Size	
		721	1111	 			
Actual Prod. During Test	01.	- Bbla.	Water - Bb	la.		Gas-MCF	
]				
GAS WELL							
Actual Prod. Test-MCF/D	l er	açth of Test	Bbls. Con	densate/MMCF		Gravity of C	Condensate
Testing Method (pitot, back	pr./ Tub	ing Pressure (Shut-in)	Casing Pr	essure (Shut-i	n)	Choke Size	
I. CERTIFICATE OF COMPLIANCE				OIL CC	NSERVA	TION COL	AMISSION
				•	11	TION CON	982
I hereby certify that the m	les and regul	stions of the Oil Conservation	APPRO	VED	JU	, L N U I	الالالالالالالالالالالالالالالالالالال
Commission have been co	omplied with	and that the information given		Original Sign	ed by When	الأوالمؤلفة القالمة المشتوري	W
above is true and comple	te to the bes	t of my knowledge and belief.	BY				

VI.

Union Texas Petroleum Corporation

6-11-82

(Signature)

(Tule)

(Date)

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.

DERUT) OF SEA ASSPECTOR, DIST. #3

TITLE __

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.