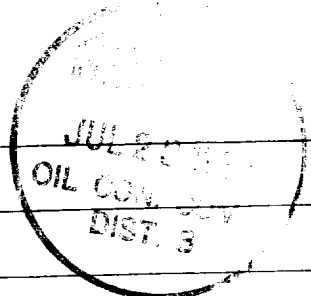


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	GAS	
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-11
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 ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☒ 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 Haynie Well No. 2 Pool Name, including Formation Basin Dakota Kind of Lease State, Federal or Fee FEE Lease No.
Location
Unit Letter B ; 820 Feet From The North Line and 1700 Feet From The East
Line of Section 4 Township 30 N Range 11W , NMPM, San Juan 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 ☒
Southern Union Gathering Co. 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 B Sec. 4 Twp. 30 N Rge. 11W Is gas actually connected? Yes When 11-10-80

IV. COMPLETION DATA
Designate Type of Completion - (X) Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.
Date Spudded 7-15-80 Date Compl. Ready to Prod. 10-2-80 Total Depth 6860 P.B.T.D. 6844
Elevations (DF, RKB, RT, GR, etc.) 5916 RKB Name of Producing Formation Dakota Top Oil/Gas Pay 6702' Tubing Depth 6650'
Perforations 6702-6813' Depth Casing Shoe 6859'
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
12 1/4" 8-5/8" 319 250
7-7/8" 5 1/2" 6859' 900 (3 stages)
2-1/16" 6650'

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 all able 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
6/10/82 (Date)
OIL CONSERVATION COMMISSION
JUL 23 1982
APPROVED _____, 19____
BY Original Signed by Jeff Edwards
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 deep well, this form must be accompanied by a tabulation of the devils tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for all wells 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 conditions.
Separate Forms C-104 must be filed for each pool in multiple completions.