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U.S.G.S.		
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-110
Effective 1-1-65

3088/W
7-15-84

I. Operator
DUGAN PRODUCTION CORP.
Address
P O Box 208, Farmington, NM 87499
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) **RECOMPLETION**
JUL 06 1984

If change of ownership give name and address of previous owner _____
OIL _____

II. DESCRIPTION OF WELL AND LEASE
Lease Name Enniskillen Well No. 2 Pool Name, including Formation Counselors Gallup *Kaheta* Kind of Lease State, Federal or Fee Fed Lease No. NM28736
Location
Unit Letter I ; 1930 Feet From The South Line and 660 Feet From The East
Line of Section 9 Township 23N Range 6W , NMPM, Rio Arriba County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Permian Corp. Address (Give address to which approved copy of this form is to be sent)
P O Box 256, Farmington, NM 87499
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
El Paso Natural Gas Co. Address (Give address to which approved copy of this form is to be sent)
P O Box 4990, Farmington, NM 87499
If well produces oil or liquids, give location of tanks. Unit I Sec. 9 Twp. 23N Rge. 6W Is gas actually connected? No When

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 XX Gas Well New Well XX Workover Deepen Plug Back Same Res'v. Diff. Res'v.
Date Spudded 5-17-84 Date Compl. Ready to Prod. 6-30-84 Total Depth 5557' RKB P.B.T.D. 5490'
Elevations (DF, RKB, RT, GR, etc.) 6762' GL; 6774' RKB Name of Producing Formation Gallup Top Oil/Gas Pay 4943 Tubing Depth 5430'
Perforations 4943-5471, 39 holes Depth Casing Shoe 5557' RKB
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
12-1/4" 8-5/8" 204' RKB 159 cf
7-7/8" 4-1/2" 5557' RKB 1745 cf in 2 stgs
2-3/8" 5430' RKB

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 6-28-84 Date of Test 6-30-84 Producing Method (Flow, pump, gas lift, etc.) swabbing and flowing
Length of Test 6 hrs Tubing Pressure -0- Casing Pressure 650 psi Choke Size ---
Actual Prod. During Test Oil - Bbls. 160 BOPD Water - Bbls. 120 BWPD frac water only Gas - MCF 160 MCFD est.

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.
Jim L. Jacobs (Signature)
Geologist (Title)
7-3-84 (Date)
OIL CONSERVATION COMMISSION
APPROVED JUL 06 1984, 19
BY Original Signed by FRANK T. CHAVEZ
TITLE SUPERVISOR DISTRICT # 3
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.