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STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

OCT 17 1986

OIL CON. DIV.
DIST. 3

Operator DUGAN PRODUCTION CORP.	
Address P O Box 208, Farmington, NM 87499	
Reason(s) for filing (Check proper box)	
<input checked="" type="checkbox"/> New Well	Change in Transporter of:
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas
	<input type="checkbox"/> Dry Gas
	<input type="checkbox"/> Condensate
Other (Please explain)	

change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Kenny	Well No. 1	Pool Name, including Formation Lybrook Gallup Ext.	Kind of Lease State, Federal or Free State	Lease No. LG-3924
Location				
Unit Letter B	330	Feet From The North	Line and 1650	Feet From The East
Line of Section 36	Township 23N	Range 7W	NMPM, Sandoval	County

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

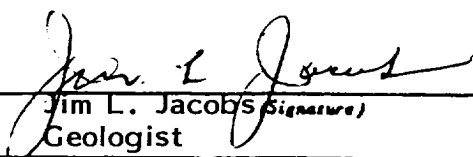
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Giant Refining, Inc.	Address (Give address to which approved copy of this form is to be sent) P O Box 256, Farmington, NM 87499	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Negotiating Gas Contract	Address (Give address to which approved copy of this form is to be sent)	
Well produces oil or liquids, give location of tanks.	Unit B	Sec. 36
	Twp. 23N	Rge. 7W
	Is gas actually connected?	When
	No	

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

NOTE: Complete Parts IV and V on reverse side if necessary.

II. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.


Jim L. Jacobs (Signature)
Geologist (Title)
10-15-86 (Date)

OIL CONSERVATION DIVISION

APPROVED _____
BY _____
TITLE _____
Original Signed by **FRANK T. CHAVEZ**
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.
Separate Forms C-104 must be filed for each pool in multiply completed wells.

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	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.				
9-16-86	10-13-86		5800'		5732'				
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth				
7284' GL; 7296' RKB	Gallup		5165'		5641'				
Perforations						Depth Casing Shoe			
5165' - 5766' Gallup						5798'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8" OD	195' RKB	159.3 cf class "B"
7-7/8"	4-1/2" OD	5798' RKB	1644 cf in 2 stages
	2-3/8" OD	5641'	

V. TEST DATA AND REQUEST FOR ALLOWABLE (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.)	
10-13-86	10-14-86	Swabbing	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
3 hrs	0	650	
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
10BO, 25 BLW, 12 MCF	80 BOPD	200 BLWPD	96 MCFD

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size