1 Mancos Corp.

1 Celsius-Denver

1 Celsius-SLC

1 NWPL

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

. ** *** ********						
DISTRIBUTE						
SANTA PE	T					
PILE						
u.1.0.4.						
LAHO OFFICE						
TRANSPORTER	OIL					
TAGAST CATER	CAS					
DPERATOR						
PROBATION OFFICE						

1-29-86

(Dole)

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

PROMATION OFFICE	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS							
DUGAN PRODUCTION CORP.		· · · · · · · · · · · · · · · · · · ·	·	·				
P O Box 208, Farmington,	NM 874	99					 	
Reason(s) for liling (Check proper box)				01	her (Please	espiain)	-	
New Well Recompletion Change in Ownership	Change in Transporter of: Oil Dry Gas Cazinghead Gas Condensate				Change of Pool* and Location of Central Tank Battery*			
If change of ownership give name and address of previous owner								<u> </u>
II. DESCRIPTION OF WELL AND L	FASF							
Lease Name	Well No. Pool Name, Including Formation			Kind of Lease		Lease No.		
Witty	2	2 South Bisti-Gallup*		State, Federal or	F. Federal	NM 16762		
Unit Letter G : 1670	Feet From	ThN	orth Lin	172	20	_ Feet From The	East	
Line of Section 12 Townshi	1p 23N		Range	1 OW	, NMPM,		San Juan	County
III. DESIGNATION OF TRANSPOR	TER OF O	T AND N	TATTIRAI	I GAS				
Name of Authorized Transporter of Oli XX		idensale		Aggress (Giv	e oddress :	o which approved	copy of this form is	to be sent)
The Mancos Corp. (NO CHA	NGE)			P O Bo	ox 1320	, Farmingtor	n, NM 87499	
Dugan Production Corp. (as 🗍			Farmington.	NM 87499	to be sent)
give location of tanks. Central **		23N	10W	Yes		i I	6-13-85	
Tank Batter If this production is commingled with th	y at from any	other less	e or pool,	give comming	gling order	number:		
NOTE: Complete Parts IV and V on								
VI. CERTIFICATE OF COMPLIANCE	Ξ				OIL C	ONSERVATIO	N DIVISION	\circ
I hereby certify that the rules and regulations of been complied with and that the information give					ED	<u>`</u>		986
my knowledge and belief.				8Y	·			
Ω				TITLE_	···	<u> </u>	SUPERVISOR DISTRICT	<u> </u>
1 Janot				H			pliance with MUL e for a newly drill	
Jim L. Jacobs (Sienalue) Geologist	İ			well, this	form must	be accompanied	i by a tabulation of with AULE 11	of the deviation
(Title)				All se		this form must b	 filled out compl 	etaly for allow

able 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.