Submit 5 Cornes
Appropriate District Office
DISTRICT I
P.C. Box 1980, Hobbs, NM 88240

1 File

State of New Mexico

Energy, Minerals and Natural Resources Department

Form C-104
Revixed I-1-89
See Instructions
at Bottom of Page

OIL CONSERVATION DIVISION

DISTRICT II
P.O. Drawer DD, Atleeta, NM 88210

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.	•	TOTRA	NSP	ORT O	LAND	NATURAL (SAS				
Operator DUGAN PRODUCTION CORP.						Well A			30-045-25981		
Address	N CORP	<u>. </u>		-					20,01		
P.O. Box 420, Farmi	ngton,	NM 87	499			0-1 (8)					
Reason(s) for Filing (Check proper box) New Well	Other (Please explain) Change in Transporter of:										
Recompletion	Oil Dry Gas Effective 5-1-90										
Change in Operator	Casinghea	d Gas	Conde	nete _			-				
If change of operator give name and address of previous operator	 -		 								
IL DESCRIPTION OF WELL	AND LEA	SE					·				
Witty	Well No. Pool Name, Includ				ing Formation 1 Th Bisti Gallup			ind of Lease Lease N ate, Federal or Fee NM 16762		.6762	
Location G	1670				North	173	20		East		
Unit Letter 12 Township	_ : _ 23N		Feet Fr	000 The 10W		Line and	Juan	Feet From The _			
Section 12 Township	2311		Range	10W		, NMPM, Sal	1 Juan			County	
III. DESIGNATION OF TRAN	SPORTE			D NATU	RAL GA	AS	17-1			()	
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 Casing	ansporter of Casinghead Gas XX or Dry Gas					Address (Give address to which approved copy of this form is to be sent)					
Dugan Production Corp						Box 420,					
If well produces oil or liquids, give location of tanks.	C	Sec. 12	23N	10W	Yes	nually connected?	Whe	-13 - 85			
If this production is commingled with that f IV. COMPLETION DATA	rom any othe	r lease or p	ool, giv	e counning!	ing order r	number					
	~~~	Oil Well	0	Gas Well	New W	'ell   Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion -  Date Spudded		Ready to I	Prod		Total De	<u> </u>		P.B.T.D.			
Late Spanier	Date Compl. Ready to Prod.										
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay Tubing				g Depth		
Perforations						Depth Casing Shoe					
TUBING, CASING AND						TING RECO	RD				
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			S.F	SACKS CEMENT		
	·										
V. TEST DATA AND REQUES	T FOR A	LLOWA	BLE		<u> </u>		<del></del>				
OIL WELL (Test must be after re									full 24 how	·3.)	
Date First New Oil Run To Tank						Producing Method (Flow, pump, gas lift, etc.)					
ength of Test	Tubing Pressure				Casing Pr	essire		D-6-61	PEGELAE		
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.			APR2	APR 2 7 1990		
GAS WELL								OII CO	N. DI	 V.	
Actual Prod. Test - MCF/D	Length of Test					densate/MMCF		Gravity of G	den sye	<u> </u>	
esting Method (pitot, back pr.)	Tubing Pressure (Shix-m)				Casing Pressure (Shus-in)			Choke Size	Choke Size		
T OPEN LEON CENTERS	TE OF	CO) MI	TANT	CT.							
/L OPERATOR CERTIFICATE OF COMPLIANCE  I bereby certify that the rules and regulations of the Oil Conservation					OIL CONSERVATION DIVISION						
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					Date Approved APR 2 7 1990						
Jul 1 Janol											
Signature Jim L. Jaçobs Geologist					By						
Printed Name Tale					Tit	le		RVISOR DIS	STRICT	/3	
4-26-90 Date			-182°			ø	•3		~		

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-1-4 must be filed for each pool in multiply completed wells.



