

4 NMOCD

1 Mancos Corp.

1 File

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator
DUGAN PRODUCTION CORP.

Address
P O Box 208, Farmington, NM 87499

Reason(s) for filing (Check proper box)

☒ New Well
☐ Recompletion
☐ Change in Ownership

Change in Transporter of:

☐ Oil
☐ Casinghead Gas
☐ Dry Gas
☐ Condensate

Other (Please explain)

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If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Wit's End	Well No. 4	Pool Name, including Formation Undesignated Gallup	Kind of Lease State, Federal or Fee State	Lease No. LH-1896
Location				
Unit Letter <u>M</u> : <u>660</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>West</u>				
Line of Section <u>2</u> Township <u>23N</u> Range <u>10W</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

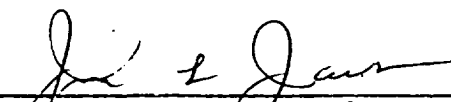
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Mancos Corp.	Address (Give address to which approved copy of this form is to be sent) P O Box 1320, Farmington, NM 87499
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit : <u>M</u> Sec. : <u>2</u> Twp. : <u>23N</u> Rge. : <u>10W</u>
Is gas actually connected?	When : <u>NO</u>

If 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.

VI. 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
June 19, 1985 (Title)

(Date)

OIL CONSERVATION DIVISION

APPROVED JUN 21 1985
BY Original Signed by FRANK T. CHAVEZ
TITLE SUPERVISOR DISTRICT # 2

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 5-21-85	Date Compl. Ready to Prod. 6-13-85		Total Depth 4870'			P.B.T.D. 4810'			
Elevations (DF, RKB, RT, GR, etc.) 6719' GL; 6731' RKB	Name of Producing Formation Gallup		Top Oil/Gas Pay 4508'			Tubing Depth 4749'			
Perforations 4508' - 4794' - Gallup						Depth Casing Shoe 4870'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			
12-1/4"	8-5/8" OD		217' RKB			159 cf			
7-7/8"	4-1/2" OD		4870' RKB			1504 cf in 2 stages			
	2-3/8"		4749'						

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 6-13-85	Date of Test 6-15-85	Producing Method (Flow, pump, gas lift, etc.) Swabbing	
Length of Test 9 hrs	Tubing Pressure ---	Casing Pressure 260 psi	Choke Size ---
Actual Prod. During Test 29 BO, 20 MCF, 150 BLW (est.)	Oil - Bbls. 77 BOPD	Water - Bbls. 400 BLWPD	Gas - MCF 53 MCED (estimated)

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