

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OPERATOR	GAS
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

REQUEST FOR ALLOWABLE
AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator: Dugar Production Corp.

Address: P.O. Box 208 Farmington, NM 87499

Reason(s) for filing (Check proper box):

☐ New Well	Change in Transporter of:	Other (Please explain)
☐ Recompletion	☒ Oil	☐ Dry Gas
☐ Change in Ownership	☐ Casinghead Gas	☐ Condensate

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

Effective December 11, 1985

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>April Surprise</u>	Well No. <u>6</u>	Pool Name, including Formation <u>South Bisti Gallup</u>	Kind of Lease State, Federal or Fee <u>Federal</u>	Lease No. <u>NM 4958</u>
Location				
Unit Letter <u>H</u>	<u>1900</u>	Feet From The <u>North</u>	Line and <u>580</u>	Feet From The <u>East</u>
Line of Section <u>7</u>	Township <u>23N</u>	Range <u>9W</u>	NMPM, <u>San Juan</u> County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
<u>Conoco, Inc.</u>	<u>P.O. Box 1429 Bloomfield, NM 87413</u>
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
<u>Dugar Production Corp.</u> (no change)	<u>P.O. Box 208 Farmington, NM 87499</u>
If well produces oil or liquids, give location of tanks. <u>Central</u> Unit <u>B</u> Sec. <u>7</u> Twp. <u>23N</u> Rge. <u>9W</u>	Is gas actually connected? <u>Yes</u> When <u>11-16-85</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.

Selma Farley
(Signature)

Production Report Supervisor

(Title)

(Date)

OIL CONSERVATION DIVISION

APPROVED _____, 19 _____

BY _____

TITLE _____

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 multiple completed wells.