

4 NMOCD 1 Mancos Corp. 1 Celsius-Denver 1 Celsius-SLC  
1 BIA 1 File

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
V.R.O.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION OFFICE	

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

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

3092/12  
FEB 24 1986  
OIL CON. DIV.  
DIST. 3

I. 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"/> Dry Gas
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate

Other (Please explain)

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Lake Placid	Well No. 1	Pool Name, including Formation South Bisti-Gallup	Kind of Lease Federal - Navajo	Lease No. N00-C-14-
Location Unit Letter I ; 2310 Feet From The South Line and 330 Feet From The East			Allotted	20-7311
Line of Section 4	Township 23N	Range 10W	NMPM, San Juan	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

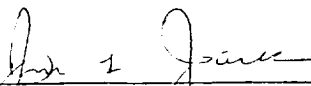
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Mancos Corp.	Address (Give address to which approved copy of this form is to be sent) P O Box 1320, Farmington, NM 87499					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Dugan Production Corp.	Address (Give address to which approved copy of this form is to be sent) P O Box 208, Farmington, NM 87499					
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 4	Twp. 23N	Rge. 10W	Is gas actually connected? No	When

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 (Title)  
2-21-86 (Date)

OIL CONSERVATION DIVISION

APPROVED  
FEB 24 1986  
Original Signed by CHARLES GHOLSON  
BY  
TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #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 XX	Gas Well	New Well XX	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 1-1-86	Date Compl. Ready to Prod. 1-20-86		Total Depth 4800'		P.B.T.D. 4778'				
Elevations (DF, RKB, RT, GR, etc.) 6605' GL; 6617' RKB	Name of Producing Formation Gallup		Top Oil/Gas Pay 4415'		Tubing Depth 4656'				
Perforations 4415' - 4686' - Gallup						Depth Casing Shoe 4800'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			
12-1/4"	8-5/8"		215' RKB			159 cf			
7-7/8"	4-1/2"		4800' RKB			1559 cf in 2 stages			
	2-3/8"		4656'						

#### 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 1-20-86	Date of Test 1-21-86	Producing Method (Flow, pump, gas lift, etc.) Swabbing	
Length of Test 8 hrs	Tubing Pressure ---	Casing Pressure 220	Choke Size ---
Actual Prod. During Test 13 BO, 85 BLW, 9 MCF	Oil - Bbls. 39 BOPD	Water - Bbls. 255 BLWPD	Gas - MCF 27 MCFD

#### 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