Sami: 5 Cores Appreniate Daniel Office F.O. DUR TYBU, HUDDE, NM 82240 . :110 State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at bottom of lage

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

1000 ruo brazos Rd., Amec, NM 87410

F.U. Drawe DD, Anera, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

DUGAN PRODUCTION CORP.							Weli API No. 30-045-26784			
P.O. Box 420, Farmin	ngton, NM 8	37499								
keason(s) for Fung (Check proper ban)	Other (Piease explain)									
New Well Change in Transporter of: Transporter of: Change in Transporter of: Change in Operator Casinghead Gas Condensate					Change of Transporter Effective 5-1-90					
If change of operator give name and address of previous operator										
II. DESCRIPTION OF WELL	AND LEASE		-		·		-			
Calgary	Well N 88	Na Pool I Sou	Name, Includ th Bist	ing Formation . i Gallup			Kind of Lease L State, Federal or Fee NM 32		2124	
Unit Lener A	:660	Feet F	rom The NO	rth Li	ne and 660	F	eet From The	East	Line	
Section 6 Townshi	_{ir} 23N	Range	10		имрм San	Juan			County	
III. DESIGNATION OF TRAN				RAL GAS						
Name of Authorized Transporter of Oil XX or Condensate P.O. Box 256, Farmington, NM 87499								ะน)		
Name of Amborized Transponer of Casinghead Gas [XX] or Dry Gas Dugan Production Corp. (no change)					Address (Give address to which approved copy of this form is to be sent) P.O. Box 420, Farmington, NM 87499					
If well produces oil or liquids, give location of tanks.				Is gas actually connected? W			Vhen ? 8-4-87			
If this production is communicated with that				<u>:</u>	nber:		<u> </u>			
IV. COMPLETION DATA	loii w	/all	Gas Well	New Well	Workover	Deepen	Plug Back Sa	me Dec'y	Diff Res'v	
Designate Type of Completion		En]	OZS WEII	İ	Workstein	Decpen		uik Kes v		
Date Spudded	Spudded Date Compl. Ready to Prod.			Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth			
Perforations					Depth Casing Shoe					
TUBING, CASING AND										
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT			
		 -						·		
V. TEST DATA AND REQUES	T FOR ALLOV	VABLE				· · · · · · · · · · · · · · · · · · ·	.!			
OIL WELL (Test must be after re Date First New Oil Run To Tank	Date of Test	ne of load e	oil and must		exceed top allo ethod (Flow, pu			full 24 hour	s.)	
				Casing Pressure			Chokd Sta	6 E	IVE	
Length of Test	Tubing Pressure			Caring Fitzoute			ADR 2 7 1990			
Actual Prod. During Test	Oil - Bbls.			Water - Bbls			Gas- MCF			
GAS WELL								DIST	•	
Actual Prod. Test - MCF/D	Length of Test			Bbls. Condensate/MMCF			Gravity of Condensate			
Testing Method (pitot, back pr.)	Tubing Pressure (Shui-m)			Casing Pressure (Sout-in)			Choke Size	-		
VI OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation				OIL CONSERVATION DIVISION						
Division have been complied with and that the information given above as true and complete to the best of my knowledge and belief.				Date ApprovedAPR 9.7.1990						
Las 1 Just				By						
Jim L. Jacobs Geologist				Sand i College						
4-25-90		25-182 elephone N	·——	Title		50	*	DISTAN	¥-13	

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 III.
- 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.

