

4 NMOCD

1 File

State of New Mexico

Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

RECEIVED
NOV 06 1990
OIL CON. DIV.
DIST. 3

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

I.

| | |
|---|---|
| Operator DUGAN PRODUCTION CORP. | Well API No. 30-045-27822 |
| Address P.O. Box 420, Farmington, NM 87499 | |
| Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain) | |
| New Well <input checked="" type="checkbox"/> | Change in Transporter of: |
| Recompletion <input type="checkbox"/> | Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> |
| Change in Operator <input type="checkbox"/> | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> |

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|----------------------|---|---|------------------------------|
| Lease Name Calgary | Well No. 6 | Pool Name, Including Formation South Bisti Gallup | Kind of Lease State, <u>Federal</u> or Fee | Lease No. NM 32124 |
| Location Unit Letter K : 2205 Feet From The South Line and 2205 Feet From The West Line Section 6 Township 23 N Range 10 W , 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"/> 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 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 420, Farmington, NM 87499 | |
| If well produces oil or liquids, give location of tanks. | Unit A | Sec. 6 |
| | Twp. 23N | Rge. 10W |
| | Is gas actually connected? Yes | When? 11-2-90 |

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

| | | | | | | | | |
|--|--|-----------------------------|--|-----------------------------------|------------------------------|-----------|------------|------------|
| Designate Type of Completion - (X) | Oil Well <input checked="" type="checkbox"/> | Gas Well | New Well <input checked="" type="checkbox"/> | Workover | Deepen | Plug Back | Same Res'v | Diff Res'v |
| Date Spudded 10-11-90 | Date Compl. Ready to Prod. 11-2-90 | Total Depth 4620' | | P.B.T.D. 4540' | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 6547' GL; 6559' RKB | Name of Producing Formation Gallup | | Top Oil/Gas Pay 4314' | | Tubing Depth 4482' | | | |
| Perforations 4314-4500' Gallup | | | | Depth Casing Shoe 4614' | | | | |
| TUBING, CASING AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 12-1/4" | 8-5/8" | | 224' RKB | | 159 cf | | | |
| 7-7/8" | 4-1/2" | | 4614' RKB | | 1709 cf in 2 stages | | | |
| | 2-3/8" | | 4482' | | | | | |

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (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 Tank 11-2-90 | Date of Test 11-5-90 | Producing Method (Flow, pump, gas lift, etc.) pumping | |
| Length of Test 24 hours | Tubing Pressure --- | Casing Pressure 50 | Choke Size --- |
| Actual Prod. During Test 45 BO, 45*BLW, 18 MCF | Oil - Bbls. 45 BOPD | Water - Bbls. 45 BLWPD* | Gas - MCF 18 MCFD |

GAS WELL

*water is frac fluid.

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| 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 |

VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.

Signature
Jim L. Jacobs
Printed Name
11-5-90
Date
Geologist
Title
325-1821
Telephone No.

OIL CONSERVATION DIVISION

Date Approved **NOV 02 1990**

By **Original Signed by CHARLES GHOLSON**

Title **DEPUTY OIL & GAS INSPECTOR, DIST. 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-104 must be filed for each pool in multiply completed wells.