

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

Operator DUGAN PRODUCTION CORP.

Address P O Box 208, Farmington, NM 87401

Reason(s) for filing (Check proper box)		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 Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner \_\_\_\_\_

DESCRIPTION OF WELL AND LEASE

Lease Name <u>July Jubilee</u>	Well No. <u>1</u>	Pool Name, Including Formation <u>**Basin Dakota/Gallup</u>	Kind of Lease State, Federal or Fee <u>Fed.</u>	Lease No. <u>NM 24661</u>
Location				
Unit Letter <u>G</u>	<u>1650</u> Feet From The <u>North</u> Line and <u>1520</u> Feet From The <u>East</u>			
Line of Section <u>30</u>	Township <u>24N</u>	Range <u>9W</u>	NMPM, <u>San Juan</u>	County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <u>Inland Corp.</u>	Address (Give address to which approved copy of this form is to be sent) <u>P O Box 1528, Farmington, NM 87401</u>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Dugan Production Corp.</u>	Address (Give address to which approved copy of this form is to be sent) <u>P O Box 208, Farmington, NM 87401</u>
If well produces oil or liquids, give location of tanks.	Unit <u>G</u> Sec. <u>30</u> Twp. <u>24N</u> Rge. <u>9W</u>

If this production is commingled with that from any other lease or pool, give commingling order number: \*\*Application made to NMOCD  
COMPLETION DATA in Santa Fe. Hearing pending - 10-21-81

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res' <input type="checkbox"/>
Date Spudded <u>6-28-81</u>	Date Compl. Ready to Prod. <u>8-31-81</u>	Total Depth <u>6245'</u>		P.B.T.D. <u>6180'</u>				
Elevations (DF, RKB, RT, GR, etc.) <u>6980' GL</u>	Name of Producing Formation <u>**Dakota/ Gallup</u>		Top Oil/Gas Pay <u>5008</u>		Tubing Depth <u>6151' RKB</u>			
Perforations <u>5008-5234, Gallup (52 holes) and 6148-58, Dakota (10 holes)</u>					Depth Casing Shoe <u>6247' RKB</u>			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<u>12-1/4"</u>	<u>8-5/8"</u>	<u>219' RKB</u>	<u>135 sx Class B 2% CaCl</u>
<u>7-7/8"</u>	<u>4-1/2"</u>	<u>6247' RKB</u>	<u>564.5 cu.ft. 1st stage</u>
	<u>2-3/8"</u>	<u>6151' RKB</u>	<u>1203 cu.ft. 2nd stage</u>

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 all able for this depth or be for full 24 hours)

Date First New Oil Run To Tanks <u>8-27-81</u>	Date of Test <u>9-24-81</u>	Producing Method (Flow, pump, gas lift, etc.) <u>flowing</u>	
Length of Test <u>24 hrs</u>	Tubing Pressure <u>55</u>	Casing Pressure	Choke Size <u>---</u>
Actual Prod. During Test	Oil-Bbls. <u>114</u>	Water-Bbls. <u>25 (frac)</u>	Gas-MCF <u>493</u>

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

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.

Thomas A. Dugan  
(Signature)  
Petroleum Engineer  
(Title)  
10-13-81  
(Date)

OIL CONSERVATION DIVISION

APPROVED JAN 5 1982, 19  
BY Original Signature  
TITLE SUPERVISOR DISTRICT #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 deviated 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