4 NMOCD   1 File   1 Conoco

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

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

RECEIVED
OCT 07 1988
OIL CON. DIV.
DIST. 3

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator
DUGAN PRODUCTION CORP.

Address
P.O. Box 5820, Farmington, NM 87499-5820

Reason(s) for filing (Check proper box)

[X] New Well

[ ] Recompletion

[ ] Change In Ownership

Change in Transporter of:

[ ] Oil

[ ] Casinghead Gas

[ ] Dry Gas

[ ] Condensate

Other (Please explain)

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

I. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease State, Federal or Fee	Lease No.
March On	1	Bisti Lower Gallup Ext.	State	LG-5685

Location

Unit Letter **F** : **1720** Feet From The **North** Line and **1910** Feet From The **West**

Line of Section **32** Township **24N** Range **9W** , NMPM. **San Juan** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [XX] or Condensate [ ] Conoco	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1429, Bloomfield, NM 87413
Name of Authorized Transporter of Casinghead Gas [XX] or Dry Gas [ ] Dugan Production Corp.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 5820, Farmington, NM 87499-5820

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	F	32	24N	9W	No	

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.*

V. 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.

John D. Roe

John D. Roe   (Signature)
Petroleum Engineer

10-6-88   (Title)

_____ (Date)

OIL CONSERVATION DIVISION

11-7-88
APPROVED _____

NOV 07 1988 19
Original Signed by FRANK T. CHAVEZ

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 change of owner, well name or number, or transporter, or other such change of condition.

7. COMPLETION DATA

Designate Type of Completion — (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	XX		XX					

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
8-30-88	9-13-88	5071'	5011'

Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
6802' GL; 6814' RKB	Gallup	4758'	4970' RKB

Perforations		Depth Casing Shoe
4758' - 4977' Gallup		5066' RKB

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8" OD	200' RKB	218 cu.ft.
7-7/8"	4-1/2" OD	5066' RKB	1608 cu.ft. in 2 stages
	2-3/8"	4970' RKB	

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)

OIL WELL

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
9-13-88	10-5-88	pumping	

Length of Test	Tubing Pressure	Casing Pressure	Choke Size
23 hrs	pumping	390	---

Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
47 BO, 20 BLW* 10 MCF	49 BOPD	21 BLWPD*	11 MCFD

*water is frac fluid

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