Submit 5 Copies
Appropriate District Office
DISTRICT_I 4 NMOCD P.O. Box 1980, Hobbs, NM 88240 File

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

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

OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aziec, NM \$7410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Well API No Operator 30 039 21200 Dugan Production Corp. Address P.O. Box 420, Farmington, NM 87499
Reason(s) for Filing (Check proper box) Other (Please explain) Change of Operator New Well П Change in Transporter of: Dry Gas Effective 11/1/92 Recompletion X Casinghead Gas Condensate Change in Operator If change of operator give name and address or previous operator Texaco Exploration & Production Inc., 3300 North Butler, Farmington, NM 87401 II. DESCRIPTION OF WELL AND LEASE Lease Na Kind of Lease State (Federal) or Fee Well No. Pool Name, Including Formation Lease Name 078048 SF Ballard Pictured Cliffs Porkchop 2 Location South line and . 1860 East 1640 Feet From The _ Feet From The Line Unit Letter Rio Arriba 29 26N 7W County NMPM. Range III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)
P.O. Box 4990, Farmington, NM 87499 Name of Authorized Transporter of Casinghead Gas or Dry Gas XX El Paso Natural Gas Co. is gas actually connected? When? Tup | Unit Sec If well produces oil or liquids, Rge. give location of tanks. yes If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA New Well Workover . | Deepen | Plug Back Same Res'v Diff Res'v Gas Well Oil Well Designate Type of Completion - (X) Total Depth P.B.T.D. Date Compl. Ready to Prod. Date Spudded Top Oil/Gas Pay Tubing Depth Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) Depth Casing Shoe Perforations TUBING, CASING AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE DEPTH SET HOLE SIZE 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 Producing Method (Flow, pump, gas lift, Date First New Oil Run To Tank Date of Test 120 8 Casing Pressure Length of Test Tubing Pressure Water - Bbls Actual Prod. During Test Oil - Bbls. DE. **GAS WELL** Gravity of Condensate Length of Test Bbls. Condensate/MMCF Actual Prod. Test - MCF/D Choke Size Casing Pressure (Shut-in) Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) VL OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above NOV 1 6 1992 is true and complete to the best of my knowledge and belief. Date Approved By_ Signature SUPERVISOR DISTRICT #3 Bud Crane Production Superintendent

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Printed Name

Date

11/9/92

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

Title_

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Title

325-1821

Telephone No.

- 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.