

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
Revised 10-01-78
Format 06-01-83
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NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATOR	
PROMOTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED
OIL CONSERVATION DIV.
JAN 3 1989

Operator
DUGAN PRODUCTION CORP.

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

Person(s) for filing (Check proper box)

- New Well
- Recompletion
- Change in Ownership

Change in Transporter of:

- Oil
- Castinghead Gas
- Dry Gas
- Condensate

Other (Please explain)

Effective 11-1-88

Change of ownership give name and address of previous owner
Beta Development Co., 238 Petroleum Plaza, Farmington, NM 87401

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease State, Federal or F**	Lease No.
Platero Navajo	1	Basin Dakota	Federal SF	078937

CA#SW-64

Location
Unit Letter E : 1650 Feet From The North Line and 790 Feet From The West
Line of Section 24 Township 26N Range 11W , NMPM, San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate
Conoco, Inc. 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 Castinghead Gas or Dry Gas
El Paso Natural Gas Co. Address (Give address to which approved copy of this form is to be sent)
P.O. Box 4990, Farmington, NM 87499

If well produces oil or liquids, give location of tanks.	Unit <u>E</u>	Sec. <u>24</u>	Twp. <u>26N</u>	Rge. <u>11W</u>	Is gas actually connected? Yes	When
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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.

IV. 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.

Bud Crane
Bud Crane (Signature)
Production Superintendent
1-5-89 (Title)
(Date)

OIL CONSERVATION DIVISION

JAN 06 1989

APPROVED _____, 19

BY Bud Crane

TITLE SUPERVISION DISTRICT # 8

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 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 multiply completed wells.