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OIL CON. DIV.
Form 3
Used 10-1-83
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STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	
	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
DUGAN PRODUCTION CORP.

Address
P O Box 208, Farmington, NM 87499

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain)
<input checked="" type="checkbox"/> 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	

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Old Hickory	Well No. 1	Pool Name, including Formation Bisti Farmington	Kind of Lease State, Federal or Fee Federal	Lease No. NM0557296A
Location				
Unit Letter F : 1850 Feet From The North Line and 1850 Feet From The West				
Line of Section 33 Township 26N Range 12W , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

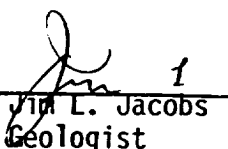
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas (no change)	Box 4990, Farmington, NM 87499
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
	Yes August 1, 1985

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.

VI. 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.


Jim L. Jacobs
Geologist
(Signature)
(Title)
August 1, 1985
(Date)

OIL CONSERVATION DIVISION

APPROVED **AUG 21 1985**
BY **Original Signed by FRANK T. CHAVEZ**
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 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.

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 Form C-104
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 Normal Oil Co.
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 OIL CON. DIV.
 DIST. 3

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well XX	New Well	Workover	Deepen	Plug Back XX	Same Res'v.	Diff. Res'v.
Date Spudded 5-19-75	Date Compl. Ready to Prod. 4-26-85		Total Depth 1240'		P.B.T.D. 946'				
Elevations (DF, RKB, RT, CR, etc.) 6120' GL	Name of Producing Formation Farmington		Top Oil/Gas Pay 533'		Tubing Depth 645'				
Perforations 533-662' Farmington						Depth Casing Shoe 1193'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
7-7/8"	5-1/2"		32'		6 cf				
5"	2-7/8"		1193'		89 cf				
	1-1/4"		645'						

V. 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)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 53 MCFD	Length of Test 3 hrs	Bbls. Condensate/MMCF ---	Gravity of Condensate ---
Testing Method (pilot, back pr.) back pressure	Tubing Pressure (Shut-In)	Casing Pressure (Shut-In) 290 psi	Choke Size 7/16"