T MINOCO.	LTICIT	1911	7-
NO. OF CONES RECEIVED]
DISTRIBUTION			
SANTA FE		1	
FILE		1	-
U.S.C.5.			
LAND OFFICE			
TRANSPORTER	OIL		
- TRANSPORTER	GAS	1	
OPERATOR			
PRORATION OFFICE			
Operator			
Dugan Pro	ducti	on.	Cor
Address			
P. O. Box	234,	Fa	rmi

	SANTA FE		NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND		Form C-104 Supersedes Old C-104 and C-11 Effective 1-1-65			
	U.S.G.S. LAND OFFICE TRANSPORTER GAS 1	AUTHORIZATION TO TR	ANSPORT OIL AND	NATURAL G	AS			
i.	OPERATOR PRORATION OFFICE Operator					,,,,,		
	Dugan Production Co	rp.						
	P. O. Box 234, Farm		[0]					
	Reason(s) for filing (Check proper box	Change in Transporter of:	Other (Please	: explain)				
	Recompletion Change in Ownership	Oil Dry G Castiighead Gas Conde	ias					
	If change of ownership give name and address of previous owner							
II.	DESCRIPTION OF WELL AND	LEASE Well No. Pool Name, including F	Formatton	Kind of Lease		7		
	Designated Hitter 2 NIPP - Pict		•		or Fee Federal	Lease No. NM 26354		
	Location	_						
		9 Feet From The South Lin						
	Line of Section 27 To	wnship 26N Range	12W , NMPM	, Sa	ın Juan	County		
III.	DESIGNATION OF TRANSPOR' Name of Authorized Transporter of Oil	or Condensate	AS Address (Give address	to which approve	ed copy of this form is t	o be sent)		
	Name of Authorized Transporter of Cas	singhead Gas or Dry Gas X	Address (Give address			o be sent)		
	El Paso Natural Gas If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Box 990, Fa			· · · · · · · · · · · · · · · · · · ·		
		th that from any other lease or pool,	NO give commingling order	number:				
•••	Designate Type of Completic	Oil Well Gas Weli	New Well Workover	Deepen	Plug Back Same Res	'v. Diff. Res'v.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.	1		
	12-18-77	1-11-78	1242'		1191'			
	Elevations (DF, RKB, RT, GR, etc.) 6132 GR	Name of Producing Formation Pictured Cliffs	Top Oil/Gas Pay		Tubing Depth 1134*			
}	Perforations		1 1115		Depth Casing Shoe			
ŀ	1119-1122', 1126-1132' TUBING, CASING, AND CEMENTING RECORD							
t	HOLE SIZE	CASING & TUBING SIZE	DEPTH SE		SACKS CEM	ENT		
	7-7/8" 4-3/4"	5-1/2"	351		5/sx			
ł	4-3/4	2-7/8"	1224'		240 cu ft			
	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be a able for this de	after recovery of total volu epth or be for full 24 hours	ne of load oil an)	id must be equal to or e	xceed top allow-		
Ī	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow	, pump, gas lift,	etc.)	٧,,		
}	Length of Test	Tubing Pressure	Casing Pressure	Т	Chore SE of the			
-	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.		Gae-MCF	<u>(</u> C		
Ĺ						:		
_	GAS WELL							
	Actual Prod. Test-MCF/D 83 AOF	Length of Test	Bbla. Condensate/MMCF	,	Gravity of Condensate			
-	Testing Method (pitot, back pr.)	3 hrs Tubing Pressure (Shut-in)	Casing Pressure (Shut-	-in)	Choke Size			
	One Point Back Pressur	e 221 SI	221 SI		1/2"			
	VI. CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given shove is true and complete to the best of my knowledge and belief.		OIL CONSERVATION COMMISSION APPROVED					
(Original Signed by A. R. Kendrick					
•			TITLE SUPERVISOR DIST. #5					
	J.A WALAN	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.						
_	Thomas A. Dugan Signa							
	Petroleum							
-	(Title)							
	1-31-7 (Da)							