			-	
NO. OF COMIES RECEIVED			14	
DISTRIBUTIO	ЭМ			
SANTA FE		\perp_{L}		
FILE		$\prod_{i} I_{i}$		
U.S.G.S.				
LAND OFFICE				
TRANSPORTER	OIL		L	
	GAS	$\int L$		
OPERATOR		\mathbb{T}		

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

Ţ	SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65		
ļ	FILE	AUTHORIZATION TO TRA	AND	CAS		
-	U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	GAS		
	LAND OFFICE OIL					
	IRANSPORTER GAS /			API 30-045-23887		
	PRORATION OFFICE					
•	Operator					
	Dugan Producti	on Corp.				
	Address Roy 208 Farmi	ngton, NM 87401				
	Reason(s) for filing (Check proper		Other (Please explain)			
	New We!1 X Change in Transporter of:					
,	Recompletion	OII Dry Go	* □			
	Change in Ownership	Casinghead Gas Conder	nsate			
	If change of ownership give nar	ne				
	and address of previous owner.					
11.	DESCRIPTION OF WELL A	ND LEASE Weil No. Pool Name, Including F	ormation Kind of Lea	se Lease No.		
	Irish	1J WAW Fruitlan	a =	ral or Fee Fed NM 10757		
	Location					
	Unit LetterD;	790 Feet From The South Lir	ne and 790 Feet From	The <u>Fast</u>		
	10	Township 26N Range	13W , NMPM, Sa	n Juan County		
	Line of Section 12	Township 26N Range	134 ,	it Juan		
III	DESIGNATION OF TRANSP	ORTER OF OIL AND NATURAL GA	AS	langual ship form in to be sent)		
	Name of Authorized Transporter of	f Oil or Condensate	Address (Give address to which appr	oved copy of this form is to be sent)		
	 	f Casinghead Gas or Dry Gas 🙀	Address (Give address to which appr	oved copy of this form is to be sent)		
	Name of Authorized Transporter o	^				
	El Paso Natura	Unit Sec. Twp. Rge.	P.O. Box 990, Farmi	hen HI O/101		
	If well produces oil or liquids, give location of tanks.		no			
		d with that from any other lease or pool,	give commingling order number:			
IV.	COMPLETION DATA		New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.		
	Designate Type of Comp	letion - (X) Gas Well	New Well Wolforer Scopen			
		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Date Spudded 11-30-79	12-28-79	1300'	1245'		
	E.evations (DF, RKB, RT, GR, et	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	6018' GL	WAW Fruitland PC	874'	899 Depth Casing Shoe		
	Perforations					
	874-889'	TUBING CASING AN	D CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	9-7/8"	7"	90'	35 sx		
	5"	2-7/8" 1-1/4"	1275'	125 sx		
		1-1/4"	8991			
		T FOR ALLOWABLE (Test must be able for this d	-the second of total volume of load o	il and must be some it organized top allow		
V.	TEST DATA AND REQUES	T FOR ALLOWABLE (lest must be able for this d	epth or be for full 24 hours)			
	DIL WELL Date First New Oil Run To Tanks Date of Test		Producing Method (Flow, pump, gas lift, etd.)			
	_		Casing Pressure	Choke SIAN 71980		
	Length of Test	Tubing Pressure	Casing Pressure			
		Oil-Bbis.	Water - Bble.	GA DHE COM. COM.		
	Actual Prod. During Test	G., 2555		DIST. 3		
	GAS WELL		Bbls. Condensate/MMCF	Gravity of Condensate		
	Actual Prod. Test-MCF/D	Length of Test				
	92 Testing Method (pitot, back pr.)	3 hrs Tubing Pressure (shut-in)	Casing Pressure (Shut-in)	Choke Size		
	Back Pressure	299 SI	299 SI	1/2"		
v	CERTIFICATE OF COMPL		OIL CONSER\	ATION COMMISSION		
4 I.			JAN 1 4	195U19		
	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED Original Signed by FRESK I. CHAVEZ			
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY				
	above is true and complete to the ocat of my means.		TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3			
			This form is to be filed in compliance with RULE 1104.			
	$\prec A$	11/14aan	I a company in the firm a manufacture of deepenge			
Thomas A. Dugan (Signature) President				well, this form must be accompanied by a table. E 111. tests taken on the well in accordance with RULE 111. Attacking of this form must be filled out completely for allow-		
			tests taken on the well in act			
		(Title)	i alia on new and recompleted warre.			
		1-4-80	17	II, III, and VI for changes of owner orter, or other such change of condition		
		(Date)	Well name of number, or transp			