

5 NMOC

1 File

1 Mancos Corp.

1 EPNG (Gerry Storey)

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
DISTRIBUTION	
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 87501Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

RECEIVED

FEB 05 1986

OIL CON. DIV.
DIST. 3REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator DUGAN PRODUCTION CORP.	
Address P O Box 208, Farmington, NM 87499	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input checked="" type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <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 La Lee Ann	Well No. 6	Pool Name, including Formation Gallegos Gallup Ext.	Kind of Lease State, Federal or Fee Federal	Lease No. NM 37913
Location Unit Letter <u>K</u> : <u>1850</u> Feet From The <u>South</u> Line and <u>1850</u> Feet From The <u>West</u> Line of Section <u>28</u> Township <u>27N</u> Range <u>13W</u> , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

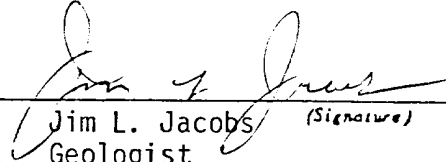
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Mancos Corp.	Address (Give address to which approved copy of this form is to be sent) P O Box 1320, Farmington, NM 87499	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> 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. Central	Unit K	Sec. 28
	Twp. 27N	Rge. 13W
Is gas actually connected? Yes		When 1-27-86

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 (Signature)
 Geologist (Title)
 2-3-86 (Date)

OIL CONSERVATION DIVISION

APPROVED FEB - 5 1986
 BY Original Signed by FRANK T. CHAVEZ
 TITLE SUPERVISOR 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 filled for each pool in multiply completed wells.

FEB 05 1986

OIL CON. DIV.
DIST. 3

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well XX	Gas Well	New Well XX	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 12-3-85	Date Compl. Ready to Prod. 2-1-86		Total Depth 12-9-85			P.B.T.D. 5287'			
Elevations (DF, RKB, RT, GR, etc.) 6090' GL, 6102' RKB	Name of Producing Formation Gallup		Top Oil/Gas Pay 5068'			Tubing Depth 5219' RKB			
Perforations 5068' - 5219' Gallup						Depth Casing Shoe 5320' RKB			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			
12-1/4"	8-5/8"		218' RKB			236 cf			
7-7/8"	4-1/2"		5320' RKB			1773 cf in 2 stages			
	2-3/8"		5219' RKB						

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 2-1-86	Date of Test 2-2-86	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs	Tubing Pressure ---	Casing Pressure 20	Choke Size ---
Actual Prod. During Test	Oil-Bbls. 35 BOPD	Water-Bbls. 50 BWPD	Gas-MCF 25 MCFD

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size