	(Russo & B	ills)		/
ſ	NO. OF COPIES RECEIVED	,		•
ł	DISTRIBUTION	NEW MEXICO OIL CO	NSERVATION COMMISSION	Form C-104
	SANTA FE /	1		Supersedes Old C-104 and C-110
ł	FILE			Effective 1-1-65
ł	U.S.G.S.	ALITHODIZATION TO TRAN	NSPORT OIL AND NATURAL G	AS COUNTY
	LAND OFFICE	AUTHORIZATION TO TRAI	TO OR FOLL AND HATORAL O	
	OIL			The latest of th
	TRANSPORTER GAS /			1076
	OPERATOR /			APR 8 1310
	PRORATION OFFICE			The second second
1.	Operator Operator			- OIL CON CO.
	Dugan Producti	on Corp		0187
	Address	on corp.		
	Box 234, Farmi	naton. NM 87401		
	Reason(s) for filing (Check proper box)	ilgeon, Nr. 87401	Other (Please explain)	
		Change in Transporter of:		
	····	Oil Dry Gas	. 🗂	
	Recompletion		一一	
	Change in Ownership	Casinghead Gas Condens		
	If change of ownership give name			
	and address of previous owner			
11.	II. DESCRIPTION OF WELL AND LEASE Lease Name			
	Lease Name	1 (1	
	Gallegos	4 Wildcat - Fr	cuitland Side, Federal	or Fee Federal SF 078106
	Location			
	Unit Letter E ; 1850 Feet From The North Line and 1120 Feet From The West			
	Line of Section 22 Township 28N Range 12W , NMPM, San Juan C			
III.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	<u>s</u>	
	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which approv	ped copy of this form is to be sent;
	1			
	Name of Authorized Transporter of Cas.	inghead Gas or Dry Gas X	Address (Give address to which approx	ped copy of this form is to be sent)
	El Paso Natural Gas		Box 990, Farmington, N	M 87401
		Unit Sec. Twp. P.ge.	Is gas actually connected? Whe	
	If well produces oil or liquids, give location of tanks.		!	
			include and a number	
If this production is commingled with that from any other lease or pool, give commingling order number:				
IV.	IV. COMPLETION DATA OIL Well Gas Well New Well Workover Deepen Plug Back Same Res'v. I			
	Designate Type of Completio	n = (X)	1	
		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Date Spudded	3-17-76	1566'	1542'
	2-20-76	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Elevations (DF, RKB, RT, GR, etc.)	Fruitland	11.52'	1460'
	5937' GR	Fruittand	1132	Depth Casing Shoe
	Perforations			
		THE CALCULA AND	CENENTING BECORD	
			DEPTH SET	SACKS CEMENT
	HOLE SIZE	CASING & TUBING SIZE	821	20
	8-3/4"	7"	1585'	125
	4-3/4"	2-7/8"		123
		1-1/4"	1460'	
			1	
v	V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exable for this depth or be for full 24 hours)			
•	OIL WELL		Producing Method (Flow, pump, gas lift, etc.)	
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, panip, gas	,,, e.c.,
				Choke Size
	Length of Test	Tubing Pressure	Casing Pressure	Choir dize
				Gas-MCF
	Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	GGB - MCF
	GAS WELL			1
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	246 AOF	3 hrs		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
	One point back pressure		311	3/4"
	<u></u>	OF.	OIL CONSERVA	ATION COMMISSION
VI	I. CERTIFICATE OF COMPLIANCE			
			APPROVED APR 9 1976 , 19	
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			
			41	
			This form is to be filed in compliance with RULE 1104.	
	Engineer (Title) 4-6-76 (Date)		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	
	·	·		at he tited for each boot in married.
			completed wells.	