	4-NMOCC (Az	ztec)	1-	Fil					
(NO. OF COP. OS RECE	4							
-	DISTRIBUTIO								
	SANTA FE								
	FILE		_						
	u.s.g.s.								
	LAND OFFICE								
	TRANSPORTER	OIL							
		GAS							
	OPERATOR	/							
1.	PRORATION OF								
•	Operator								
	Dugan Producti								
	Address								
		x 234							
	Recson(s) for filing	(Check)	proper	box)					
	New Well	Ц							
	Recompletion								
	Change in Ownershi	FX							
	of eveneratin give name								
	If change of ownership give name and address of previous owner								
Ħ.	DESCRIPTION OF WELL AND								
	Lease Name	~1	ca?	77					
	Central	Cna	Cna	Un.					
	Location								
	Unit Letter	C	_;	61					

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

	FILE		AND		_					
上	U.S.G.S.	AUTHORIZATION TO TRAN	ISPORT OIL AND	NATURAL GA	.5					
	LAND OFFICE									
	IRANSPORTER OIL									
	GAS									
ı ı	OPERATOR									
5 . (PRORATION OFFICE									
		Dugan Production Corp.								
-	dress									
	Box 234, Farmi	Box 234, Farmington, NM 87401								
-	Reason(s) for filing (Check proper box)	Change	Change of ownership from Tenneco Oil Co.							
	New Well	to Dugan Production Corp. and transporter from Four Corners Pipeline to Thriftway								
	Recompletion	Oil X Dry Gas Casinghead Gas Condens	sate Company	. effective	e May 1, 197	7.				
L	Change in Ownership X									
I	f change of ownership give name	Tenneco Oil Company,	1200 Lincoln	Tower Buil	ding, Denver	, CO 80295				
8	nd address of previous owner									
57 1	DESCRIPTION OF WELL AND I	EASE		Kind of Lease		Com. No.				
•••• آ	Lease Name	Well No. Pool Name, Instance		State, Federal	or Fee	CA 8561				
	Central Cha Cha Uni	t 5 Cha Cha Gall	up							
	Location	Feet From The // Line	290	Feet From T	he u					
	Unit Letter C; 8/6	Feet From The	e unu	-						
1	time of Section 31 Tow	mship 29N Ronge	13W , NMF	м,	San Juan	County				
į	Line of Section									
11.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	S Address (Give addres	s to which approv	ed capy of this form	is to be sent)				
	Name of Authorized Transporter of Cil	or Condensate	1							
i	Thriftway Company	inghead Gas cr Dry Gas	Address (Give addres	Box 1367, Farmington, NM 87401. Address (Give address to which approved copy of this form is to be sent)						
	Name of Authorized Transporter of Cas	cme of Authorized Transporter of Casinghead Gas cr Dry Gas								
		Unit Sec. Twp. P.ge.	is gas actually conne	Is gas actually connected? When						
	If well produces oil or liquids, give location of tanks.		<u> </u>							
	If this production is commingled wit	th that from any other lease or pool,	give commingling or	der number:						
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workove		Plug Back Same	Resty. Diff. Resty.				
	Designate Type of Completic	O.1.								
		Date Compl. Ready to Prod.	Total Depth		P.B.T.D.					
	Date Spudded				Tubing Depth					
	Elevations (DF, RKB, RT, GR, etc.)	Top Oil/Gas Pay	Top Oil/Gas Pay							
	·		<u> </u>			Depth Casing Shoe				
	Perforations									
		TUBING, CASING, AND		CEMENTING RECORD						
	UOI E S17F	HOLE SIZE CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
	HOLL SILL									
	DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow-									
V.	V. TEST DATA AND REQUEST 1 of this depth or be for full 24 hours?									
	OIL WELL Date First New Oil Run To Tanks	Producing Method (Flow, pump, gas lift, etc.)								
			Cusing Pressure		Choke Size					
	Length of Test	Tubing Pressure	Casing							
		C11 - Bb;s.	Water-Bbis.		Gas-MCF					
	Actual Prod. During Test	etual Prod. During 1 est								
	GAS WELL	Bbls. Condensate/	MCF	Gravity of Conde	nsate					
	Actual Prod. Test-MCF/D	Length of Test	BELS. Congenie							
	hock pe l	Tubing Pressure (Shut-in)	Casing Pressure (£	hut-in)	Choke Size					
	Testing Method (pitot, back pr.)									
	. CERTIFICATE OF COMPLIAN	01	L CONSERV	ATION COMMIS	SSION					
VI				HIN 1	(1 <u>9</u> 7 /	. 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.		APPROVED_		in the street of	2 £95				
				BY Original Signal by A. A. Establish						
	ROOAG TE CITO AUG COMMENTS TO A	TITLE	TITLE SUPERVISOR DIST 43							
		my to to be filed in compliance with RULE 1104.								
	-	l i	li							
	Thomas A. Dugan (Si	well, this form must be accompanied by a thin RULE 111.								
	Operator		411100	Attacking of this form must be filled out completely for allo						
	Operator		able 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.							
	6-14-77				orter, or other such	change of condition				
		Separate Forms C-104 must be filed for each pool in multiply								