5-00	_5-0CC 1		1-EPNG	
NO. OF COPIES RECEIVED		ĺ	5	-
DISTRIBUTION				
SANTA FE		1		
FILE		1	L	<u> </u>
U.S.G S.				
LAND OFFICE				
TRANSPORTER	OIL	4		
	GAS	1		
OPERATOR		2		
PRORATION OFFICE		<u> </u>	<u> </u>	L
Operator				
Dugan Prod	uctic	n C	arne	۸Y

	5-ULL 1-EPNG	Ratcilli I-IIIe					
[.	NO. OF COPIES RECEIVED 5			Dam (1.104			
}	SANTA FE		INSERVATION COMMISSION OR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-110			
	FILE / L		AND	Effective 1-1-65			
ĺ	U.S.G S.	AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL GAS				
ĺ	LAND OFFICE						
	TRANSPORTER GAS /						
	PRORATION OFFICE						
••	Operator						
	Dugan Production Corpo	oration					
		gton, New Mexico 87401					
	Reason(s) for filing (Check proper box)		Other (Please explain)				
	New Well	Change in Transporter of: Oil Dry Gas		revious name Sun #1			
	Recompletion Change in Ownership XX	Casinghead Gas Condens	— I				
		D W W L 0000 B	Auglania Clark Dldm. Damyon	Colomado 90202			
	If change of ownership give name and address of previous owner	Jerome P. McHugh, 930 Pe	etroleum Club Bldg, Denver	COTORAGO OVZVZ			
II.	DESCRIPTION OF WELL AND	Well No. Pool Name, Including Fo	rmation Kind of Lease	Lease No.			
	Lease Name Federal I	5 Harper Hill F	Fruitland State, Federal or	F Federal SF-078110			
	Location	Pictured Clif					
	Uni: Letter / J ; 18	50 Feet From The South Line	and 1850 Feet From The	East			
	Line of Section 1 Tox	waship 29N Range 14	IW , nmpm,	San Juan County			
		THE PARTY OF THE P	n				
III.	DESIGNATION OF TRANSPOR'	or Condensate	Address (Give address to which approved	copy of this form is to be sent)			
	None			Total Commission by conti			
	Name of Authorized Transporter of Ca		Address (Give address to which approved P. O. Box 990, Farming to				
	El Paso Natural Gas C	Ompany Unit Sec. Twp. Rge.	Is gas actually connected? When	is her heard of to			
	If well produces oil or liquids, give location of tanks.	None	Yes	6-19-72			
	If this production is commingled wi	th that from any other lease or pool,	give commingling order number:				
IV.	COMPLETION DATA	Oil Well Gas Well		Plug Back Same Res'v. Diff. Res'v.			
	Designate Type of Completion		X	,			
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	р.в.т.д. 1222			
	12-1-70 Elevations (DF, RKB, RT, GR, etc.)	5-28-71 Name of Producing Formation		Tubing Depth			
	5475 gr.	Fruitland - P.C.	814	1165			
	Perforations	3350		Depth Casing Shoe			
	814-824 and 1153-		CEMENTING RECORD	1240			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT			
	9"	7"	27	<u>10 sx</u>			
	4 3/4	2 7/8	1248	75 sx Class "C"			
		1 1/4	1165				
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 denth or he for full 24 hours)						
	OIL WELL Date First New Oil Run To Tanks	OIL WELL					
	Date I list New Oil Run 10 Tuliks		O				
	Length of Test	Tubing Pressure	Casing Pressure	Chake Sike			
	D. J. D. J. Tool	Oil - Bbls.	Water-Bbls.	Gas-MCF			
	Actual Prod. During Test						
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate			
	1085	3 hrs.	None				
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size 5/8			
	Back pressure	<u> </u>	268 psig				
VI	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION JUN 2 6 1972				
	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED	, , , , , , , , , , , , , , , , ,			
	a	with and that the information given he best of my knowledge and belief.	Original Signed by A. H. Kendrick				
			TITLE PETROLEUM ENGINEER DIST NO. 3				
	Original signed by T. A. Dugan		This form is to be filed in co	ompliance with RULE 1104.			
			If this is a request for allowable for a newly drilled or deepene well, this form must be accompanied by a tabulation of the deviation				
		nature)	well, this form must be accompan tests taken on the well in accord	ance with RULE 111.			
	Agent		All sections of this form mus	t be filled out completely for allow			

able on new and recompleted wells. (Title) 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.

Separate Forms C-104 must be filed for each pool in multiply completed wells. 6-23-72 (Date)