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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

Operator		Dugan Production Corp.
Address		Box 234, Farmington, NM 87401
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well	<input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion	<input type="checkbox"/>	Oil <input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>
		Dry Gas <input type="checkbox"/>
		Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

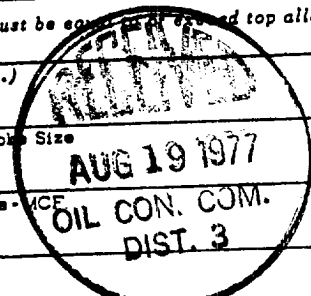
DESCRIPTION OF WELL AND LEASE		Well No.	Pool Name, Including Formation	Kind of Lease	Fee and	Lease No.
Lease Name		1-Y	Wildcat-Pictured Cliffs	State, Federal or Fee	Federal	SF 079968
Location		Unit Letter H ; 1790 Feet From The North Line and 1145 Feet From The East				
Line of Section 8		Township 29N	Range 14W	NMPM, San Juan		County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)				
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>						
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)				
Dugan Production Corp.		Box 234, Farmington, NM 87401				
Gas Company of New Mexico		Box 388, Bloomfield, NM 87413				
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When

If this production is commingled with that from any other lease or pool, give commingling order number:

V. COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Designate Type of Completion - (X)			X						
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.					
12-14-75	5-3-76	850'		804'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth					
5325' GR	Pictured Cliffs	693		695					
Perforations				Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT					
7"	5-1/2"	99'		100 sx					
4-3/4"	2-7/8"	843'		50 sx					
	1-1/4"	695'							

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL		(Test must be after recovery of total volume of load oil and must be equal to or greater than top allowable for this depth or be for full 24 hours)	
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF



GAS WELL		Bbls. Condensate/MMCF	Gravity of Condensate
Actual Prod. Test-MCF/D	Length of Test	Casing Pressure (shut-in)	Choke Size
399 AOF	3 hours	218	5/8"
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)		
One point back pressure	218		

VI. CERTIFICATE OF COMPLIANCE

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.

Richard Tully

Landman

8-19-77

(Signature)

Richard Tully

(Title)

(Date)

OIL CONSERVATION COMMISSION	
APPROVED	AUG 16 1977
BY	Original Signed by A. R. Kendrick
TITLE	SUPERVISOR DIST. 3

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 filed for each pool in multiply completed wells.