	1-File		/	
DISTRIBUTION SANTA FE		NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE		
U.S.G.S.	AUTHORIZATION TO TRAI	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		
IRANSPORTER GAS /				
PRORATION OFFICE		API 30	-045-23199	
Operator Dugan Production	Corp.			
Box 234, Farmingt	con. NM 87401	Other (Please explain)		
Reason(s) for filing (Check proper to New Well	Change in Transporter of:	Office (1 sease express)		
Recompletion	Oil Dry Gas			
Change in Ownership	Casinghead Gas Condens	sate		
If change of ownership give name and address of previous owner	•			
DESCRIPTION OF WELL AN	D LEASE. Well No. Pool Name, Including Fo	ormation Kind of Lease	Lease No.	
Lease Name	2 Harper Hill Fru	Senia Faderal of	Fee State LG 3736	
Com			Fact	
Unit Letter A ; 1	Feet From The North Line	e and 1070 Feet From The	EdSt	
Line of Section 2	Township 29N Range	14W , NMPM, San	Juan County	
DESIGNATION OF TRANSPO Name of Authorized Transporter of	ORTER OF OIL AND NATURAL GA	S Address (Give address to which approved	copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be sent)			copy of this form is to be sent)	
F1 Paso Natural Gas Co. Box 990, Farmington, NM 87401			87401	
If well produces oil or liquids,	Unit Sec. Twp. P.ge.	1		
give location of tanks.	with that from any other lease or pool,	NO No		
If this production is commingled. COMPLETION DATA	Oil Well Gas Well		Plug Back Same Res'v. Diff. Res'v.	
Designate Type of Compl		X	1	
Date Spudded	Date Compl. Ready to Prod.	Total Dept	P.B.T.D.	
8-22-78 .	10-21-78 Name of Producing Formation	1250' Top O!!/Gas Pay	1194 Tubing Depth	
Elevations (DF, RKB, RT, GR, etc. 5511 GR	Pictured Cliffs	1052		
Perforations	10501		Depth Casing Shoe	
1134-1144', 1052	- 1058'	CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
7-7/8"	5-1/2"	34' 1240' GR	8 sx 90 sx	
4-3/4"	2-7/8"	124U - GR		
		ifter recovery of total volume of load oil an	d must be equal to or exceed top allow	
. TEST DATA AND REQUEST OIL WELL	FOR ALLOWABLE (Test must be a able for this de	epth or be for full 24 hours;		
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift,	esc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Singo Par	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Ga √-M ĈF	
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
211 AOF	3 hrs		O the Class	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in) 350 SI	5/8"	
One Point Back Pressure CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION ΜΔΕ 7 1979		
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.		TITLE SUPERVISOR DIST. #3		
A / ///// an		THE DURANT This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despense the deviation of the deviation of the deviation.		
- M. Merryla		II	INC DA E (EDGINIZOR OF PRICE	
Thomas A. Dugan (Signature) Petroleum Engineer		tests taken on the well in accord	t be filled out completely for allow	
U(Title)		shie on new and recompleted wer	is. III. and VI for changes of owner	

11-2-78

(Date)

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.