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DISTRICT II P.O. Drawer DD, Arteria, NM 88210

1 File

State of New Mexico Energy, Minerals and Natural Resources Department Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	REQUE	ST FOR	ALLOWABI	E AND A	UTHORIZ	ATION				
[.	TO TRANSPORT OIL AND NATURAL GAS						Well API No.			
Operator COPP						30 045 24302				
DUGAN PRODUCTION	CORP.									
P.O. Box 420, Farmin	naton, N	M 8749	9							
Reason(s) for Filing (Check proper box)				ليا	(Please explain					
New Well		hange in Trai		Effect	tive 9/1/	/92				
Recompletion X	Oil Cacinobead	∐ Dŋ Gas ∏ Con	ndensale X							
Change in Operator X If change of operator give name Tex	Cisingseau	levation	s Produc	tion Inc	. 3300	North Bu	ıtler, F	armingto	n, NM 8740	
and address of previous operator Tex	xaco Exp	TOTACIO	1 & IIOduc	.010.1						
II. DESCRIPTION OF WELL	AND LEAS		- Fa-ration	Kind of	Kind of Lease Lease No.					
Lease Name	'	Well No. Pool Name, including 1 of the					State, Federal or Fee			
Garrett Federal Com		1E F	Stanco Mes	averac						
Location Unit Letter B	:11'	70 Fe	et From The N	lorth Line	and147	0F∞	t From The _	East	Line	
Section 12 Townshi	p 29N	Ra	inge 11W	, NM	IPM, Sa	n Juan			County	
	iononaria	OF OIL	AND NATIO	RAL GAS						
III. DESIGNATION OF TRAN	SPURTER	or Condensate	AND NATU	,	address 10 wh					
				P.O. BO	x 256, F	armingto	n, MM	87499		
Giant Refining Inc. Name of Authorized Transporter of Casinghead Gas or Dry Gas XX					P.O. Box 256, Farmington, NM 87499 Address (Give address to which approved copy of this form is to be sent)					
F1 Pago Natural Gas Co.					P.O. Box 4990, Farmington, NM 87499 Is gas actually connected? When?					
If well produces oil or liquids,	Unit Sec. Iwp. Age.			ves	- сощесть.	1				
give location of tanks. If this production is commingled with that	B L	12 2			ег					
If this production is commungled with that IV. COMPLETION DATA	Hom any one	, jouan or por				,		la Pois	Diff Res'v	
		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Dill Kest	
Designate Type of Completion - (X)				Total Depth		L	P.B.T.D.	L	-1	
Date Spudded Date Compl. Ready to Prod.										
TO DE DES DE CR AIG) Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth		
Elevations (DF, RKB, RT, GR, etc.)				Depth Casing Shoe						
Perforations										
		- tpp1C C	A CINIC A NID	CEMENTI	NG RECOR	D				
		UBING, C	HING SIZE	CEMENTING RECORD DEPTH SET			SACKS CEMENT			
HOLE SIZE	- CAS	CASING & TUBING SIZE								
					····		 			
				<u> </u>			 			
		TTOWN	DIE				_1			
V. TEST DATA AND REQUE	ST FOR A	KLLUIYAJ Mal valume al	load oil and mus	is be equal to or	exceed top all	owable for th	is depth or be	for full 24 how	ers.) ;	
OIL WELL (Test must be after Date First New Oil Run To Tank	Date of Te			Producing M	be equal to or exceed top allowable for this depth or be for full 24 hours.) Producing Method (Flow, pump, gas lift, etc.)					
Dette i ii x i and Oii trom 10				C			Choke Size		a (***	
Length of Test	Tubing Pre	Tubing Pressure Oil - Bbls.			Casing Pressure Water - Bbls			CFI		
								C) to a		
Actual Prod. During Test	Oil - Bbls.							- 19 19 19 19 19 19 19 19 19 19 19 19 19 	92	
							s	FATOR		
GAS WELL Actual Prod. Test - MCF/D	[] enoth of	Test		Bbls. Condensate/MMCF			Gravity of Cocky.			
Actual Prod. Test - MCP/D	Length of Test						Choke Size DIST. 3			
Testing Method (pitot, back pr.)	Tubing Pr	essure (Shut-	m)	Casing Pres	sure (Shut-in)		Cloke 312			
	CATEO	E COMP	IANCE	1	011 00	NOED!	/ATION	וחועופוי	ΟN	
VI. OPERATOR CERTIF	oulations of the	e Oil Conserv	ation	11	OIL CO					
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					NEW 10 40					
is true and complete to the best of my knowledge and belief.					Date Approved					
- Dr. Jan					Original Signed by CHARLES GHOLSON					
Jan 1 your					By					

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

ľm L.

finted Name

9/9/92

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance

Title

DEPUTY OIL & GA THE

Geologist

325-1821 Telephone No.

2) All sections of this form must be filled out for allowable on new and recompleted wells.

2) Ell out only Sections I. II. III. and VI for changes of operator, well name or number, transporter, or other such changes.