	4-NMOCC (Aztec) 2-Mour	ntain Fuel (Mickel & Zub	aton) I-Termeco I-FII	.c /
	DISTRIBUTION SANTA FE	REQUEST F	NSERVATION COMMISSION OR ALLOWABLE AND	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65
	U.S.G.S. LAND OFFICE IRANSPORTER OIL GAS / OPERATOR / PRORATION OFFICE	AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL G	,
I.	Dugan Production Corp.			
	Address Box 234, Farmington, NM 87401 Reason(s) for filing (Check proper box) Other (Please explain)			
	New We!! Recompletion Change in Ownership	Change in Transporter of: Oil Dry Gas Casinghead Gas Condens		
Į.	If change of ownership give name and address of previous owner			
	DESCRIPTION OF WELL AND I	EASE Well No. Puol Name, including Fo		e Lease No.
	Mucho Deal			The West
		Teet From The North Line	14W , NMPM,	San Juan County
	Line of Section	nship JON Hange		
	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of CII or Condensate Address (Give address to which approved copy of this form is to be sent) Address (Give address to which approved copy of this form is to be sent)			
	Northwest Pipeline Corporation Box 90, Farmington, NM 87401 Northwest Pipeline Corporation Box 90, Farmington, NM 87401			
	If well produces oil or liquids, give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number:			
IV	. COMPLETION DATA	Cil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v
	Designate Type of Completic	on - (X) X	X Total Depth	P.B.T.D.
	Date Spudded	Date Compl. Ready to Prod. 8-2-77	6575 '	6516'
	6-15-77 Elevations (DF, RKB, RT, GR, etc.) 6040' GR	Name of Producing Formation Dakota	Top Oil/Gas Pay 6330'	Tubing Depth 6469 Depth Casing Shoe
	Perforations 6330-6336', 6366-6370', 6395-6401', 6474-6490'			
	6330-6336', 6366-6	TUBING, CASING, AN	D CEMENTING RECORD	SACKS CEMENT
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	125
	12-1/4" 7-7/8"	8-5/8" 4-1/2"	204 ' 6572 '	650 cu ft (1st stage 1430 cu ft (2nd stage
		1-1/2"	6469'	
,	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 all oil. WELL Producing Method (Flow, pump, gas lift, etc.)			
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	
	Length of Test	Tuping Pressure	Cosing Pressure	Cheke Size
	Actual Prod, During Test	Oli-Bile.	Water - Bbis.	Gda - MCF
	GAS WELL Actual Prod. Test-MOF/D	Langth of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	2750 AOF	20 hrs Tabling Pressure (Shut-in)	Caeing Pressure (Ehut-in)	Cheke Size 3/32-5/16"
	Four Point Back Pressu	re 1993	1995 OIL CONSER	VATION COMMISSION
١	VI. CERTIFICATE OF COMPLIANCE		, 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.			

This form is to be filed in compliance with RULE 1104. If this is a request for silowable 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. Thomas A. Dugan Petroleum Engineer (Title)

8-24-77

(Detr

TITLE_

All sections of this form must be filled out completely for allow-shie 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.