

Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS**

Operator Dugan Production Corp.	Well API No. 30-045-25408
Address P.O. Box 420, Farmington, NM 87499	
Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> Other (Please explain) New Well <input type="checkbox"/> Change in Transporter of: Commingled Gallup & Dakota Recompletion <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator _____	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Poles Paradise	Well No. 2	Pool Name, Including Formation Wildcat Gallup	Kind of Lease State, Federal or Fee	Lease No. NM 16057
Location Unit Letter <u>K</u> : <u>1850</u> Feet From The <u>South</u> Line and <u>1850</u> Feet From The <u>West</u> Line Section <u>9</u> Township <u>30N</u> Range <u>14W</u> , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Giant Refining <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 256, Farmington, NM 87499
Name of Authorized Transporter of Casinghead Gas Dugan Production Corp. <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 420, Farmington, NM 87499
If well produces oil or liquids, give location of tanks. Unit <u>K</u> Sec. <u>9</u> Twp. <u>30N</u> Rge. <u>14W</u>	Is gas actually connected? <u>yes</u> When? <u>DHC-815</u>
If this production is commingled with that from any other lease or pool, give commingling order number: _____	

V. COMPLETION DATA

Designate Type of Completion - (X) <input checked="" type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input type="checkbox"/> Workover <input checked="" type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'v <input type="checkbox"/> Diff Res'v <input checked="" type="checkbox"/>	Date Spudded 6-28-82	Date Compl. Ready to Prod. 8-8-91	Total Depth 6040	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.) 5575' GL	Name of Producing Formation Gallup	Top Oil/Gas Pay 4927'	Tubing Depth 5822' RKB	Depth Casing Shoe
Perforations 4927-5248' (Gallup)				

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	2-3/8"	5822' RKB	
	9 5/8	163	136 y.
	4 1/2	6040	1756 y.

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 exceed top allowable for this depth or DE for full 24 hours)			
Date First New Oil Run To Tank 8-8-91	Date of Test 8-21-91	Producing Method (Flow, pump, gas lift, etc.) pumping	
Length of Test 24 hrs	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 5 BO, 35 MCF, 20BLW	Oil - Bbls. 5 BOPD	Water - Bbls. *20 BLWPD	Gas - MCF 35 MCFD

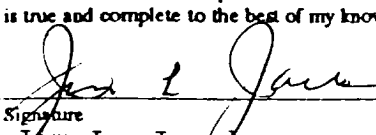
GAS WELL

*Note: water is frac fluid.

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.


Signature Jim L. Jacobs Geologist
Printed Name 9-5-91 Title 325-1821
Date 9-5-91 Telephone No. 325-1821

OIL CONSERVATION DIVISION

Date Approved JUN 01 1992
By Original Signed by CHARLES GHOLSON
Title DEPUTY OIL & GAS INSPECTOR, DIST. #3

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

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.