

Form C-104
Revised 10-01-78
Format 06-01-83

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OIL CON. DIV.
DIST. 3

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.A.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

I. Operator
DUGAN PRODUCTION CORP.

Address
P.O. Box 5820, Farmington, NM 87499-5820

Reason(s) for filing (Check proper box) Other (Please explain)

<input type="checkbox"/> New Well	Change in Transporter of:	Creation of Basin-Fruitland Coal Gas Pool Per NMOCD Order No. R-8768 & R-8769 Effective 11-1-88
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas	
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Castinghead Gas <input type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner: From Jacobs, Inc.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Gibraltar	Well No. 1	Pool Name, including Formation Basin-Fruitland Coal Gas	Kind of Lease State, Federal or Fee Federal	Lease No. NM 5511
Location Unit Letter G ; 1850 Feet From The North Line and 1850 Feet From The East Line of Section 9 Township 30N Range 14W , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Castinghead 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. (no change)	P.O. Box 5820, Farmington, NM 87499-5820
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
	No

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

NOTE: Complete Parts IV and V on reverse side if necessary.

IV. 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 is true and complete to the best of my knowledge and belief.

Jim L. Jacobs (Signature)
Geologist
11-23-88 (Date)

OIL CONSERVATION DIVISION
NOV 30 1988

APPROVED _____, 19____
BY Jim L. Jacobs
TITLE **SUPERVISION DISTRICT # 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 deviated 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 multiple completed wells.