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peropriate District Office 1 Texaco P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM \$7410

DISTRICT II P.O. Drawer DD, Aneria, NM \$4210

| 1000 KIO BIAZOS KIL, AZIEL, IAM 67410 | REQUEST FO | | | | | | | | |
|--|---|----------------------|---|---|----------------------------|-------------------|----------------|------------|--|
| L. Operator | TO TRAN | NSPORT OIL | L AND NA | TUHAL G | | API No. | | | |
| DUGAN PRODUCTION | N CORP. | | | | | | | | |
| P.O. Box 420, Farmi | ngton, NM 874 | 199 | | (0) | 1 : 1 | | | | |
| Reason(s) for Filing (Check proper bax) New Well | Change is T | ransporter of: | | er (Please exp ange of | | r from Te | caco In | c to | |
| Recompletion | | Ory Gas | | | | Corp. effe | | | |
| Change in Operator | _ | Condensate | | | | | | | |
| If change of operator give name and address of previous operator | xaco Inc., P.O | . Box 2100 |), Denve | r, CO 8 | 30201 | | | | |
| II. DESCRIPTION OF WELL | | ool Name, Include | - F | | V:- 4 | -61 | | ase No. | |
| Lease Name Dome Federal 15-22-7 | | Rusty Chacra State 1 | | | of Lease Federal or Fee | | | | |
| Location | | - | tusty on | <u> </u> | | | J. INIVI. O | 033 | |
| Unit Letter P | _ : 900 F | Feet From The | South Lin | and119 | 00 Fe | et From The | East | Line | |
| Section 15 Townshi | p 22N p | lange 7 | W , М | мрм, Sar | ndoval | | | County | |
| III. DESIGNATION OF TRAN | SPORTER OF OIL | AND NATU | | | | | | | |
| Name of Authorized Transporter of Oil | or Condensa | ue | Address (Giv | e address 10 w | hich approved | copy of this form | n is to be set | nt) | |
| Name of Authorized Transporter of Casinghead Gas or Dry Gas XX Dugan Production Corp. | | | 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, | es oil or liquids, Unit Sec. Twp. Rge. | | | Is gas actually connected? When? | | | | | |
| give location of tanks. | 1 - | | <u> </u> | | | | | | |
| If this production is commingled with that if IV. COMPLETION DATA | from any other lease or po | ol, give commingi | ing outer mini | xer: | | | | | |
| Designate Type of Completion | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back S | rme Res'v | Diff Res'v | |
| Date Spudded | Date Compl. Ready to P | rod. | Total Depth | | | P.B.T.D. | | | |
| vations (DF, RKB, RT, GR, etc.) Name of Producing Formation | | | Top Oil/Gas Pay | | | Tubing Depth | | | |
| Perforations | | | 1 | | | Depth Casing Shoe | | | |
| | TURNIC C | A STNIC A NITO | CEMENTIN | JC PECOE | <u> </u> | <u> </u> | | | |
| HOLE SIZE | TUBING, CASING AND CASING & TUBING SIZE | | DEPTH SET | | | SACKS CEMENT | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| V. TEST DATA AND REQUES OIL WELL (Test must be after re | T FOR ALLOWAE covery of total volume of t | | be equal to or | exceed top all | owable for this | depth or be for | full 24 hour | s.) | |
| Date First New Oil Run To Tank | Date of Test | | | Producing Method (Flow, pump, gas lift, etc.) | | | | | |
| Length of Test | Tubing Pressure | | Casing Pressu | 37 | ECE | Q. W.E | וו | | |
| Actual Prod. During Test | Oil - Bbls. | | Water - Bbls. | | | Gas- MCF | U) | <u></u> | |
| GAS WELL | <u> </u> | | | | JANO | 4.55. | | | |
| Actual Prod. Test - MCF/D | Length of Test | | Bhis. Condens | ate/MMCF (| JIL CU | Gravity of Con | densate | | |
| | ord (pitot, back or) Tubing Pressure (Shut-in) | | Casing Pressu | re (Shut-in) | Dis | Choke Size | | | |
| Testing Method (pitot, back pr.) | Tooling Treasure (Salar E) | , | | | | | | | |
| VL OPERATOR CERTIFICA | ATE OF COMPL | IANCE | | | ISERV | ATION D | IVISIO | N | |
| I hereby certify that the rules and regular | OIL CONSERVATION DIVISION | | | | | | | | |
| Division have been complied with and the is true and complete to the best of my ki | _ | acove | Date | Approve | д, | JAN 04 19 | 189 | | |
| Jan Jan | | | | Approve | | \ | / | | |
| 1 1 1 | By Bill Chang | | | | | | | | |
| Signature | | | By | | | | | | |
| Signature Jim L. Jacobs Printed Name 1-3-90 | | ogist ide | Title | | | VISOR DIS | RICT # | 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.