

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
DUGAN PRODUCTION CORP.

Address  
P O Box 208, Farmington, NM 87499

Reason(s) for filing (Check proper box)  
☒ New Well  
☐ Recompletion  
☐ Change in Ownership  
 Change in Transporter of:  
☐ Oil  
☐ Casinghead Gas  
☐ Dry Gas  
☐ Condensate  
 Other (Please explain)

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If change of ownership give name  
and address of previous owner

## II. DESCRIPTION OF WELL AND LEASE

Lease Name Wit's End	Well No. 1	Pool Name, including Formation Undesignated Gallup	Kind of Lease State, Federal or Fee State	Lease No. LH-1896
Location Unit Letter 0 : 660 Feet From The South Line and 1980 Feet From The East Line of Section 2 Township 23N Range 10W, NMPM, San Juan County				

## III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Mancos Corp.	Address (Give address to which approved copy of this form is to be sent) P O Box 1320, Farmington, NM 87499	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Dugan Production Corp.	Address (Give address to which approved copy of this form is to be sent) P O Box 208, Farmington, NM 87499	
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 2
	Twp. 23N	Rge. 10W
	Is gas actually connected? NO	
	When	

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.

## VI. 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*  
Jim L. Jacobs (Signature)  
Geologist  
June 26, 1985 (Title)  
(Date)

OIL CONSERVATION DIVISION  
7-1-85 JUL 1 1985  
APPROVED  
Original Signed by FRANK T. CHAVEZ  
BY  
SUPERVISOR 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 deviation 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 multiply completed wells.

#### IV. COMPLETION DATA

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Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		XX		XX					
Date Spudded 6-3-85	Date Compl. Ready to Prod. 6-25-85			Total Depth 4922'			P.B.T.D. 4854'		
Elevations (DF, RKB, RT, CR, etc.) 6754' GL; 6766' RKB		Name of Producing Formation Gallup			Top Oil/Gas Pay 4535'			Tubing Depth 4776'	
Perforations 4535' - 4791' Gallup							Depth Casing Shoe 4922'		

#### TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8-5/8" OD	192' RKB	159 cf
7-7/8"	4-1/2"	4922'	1428 cf in 2 stages
	2-3/8"	4776'	

#### V. 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 allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 6-22-85	Date of Test 6-25-85	Producing Method (Flow, pump, gas lift, etc.) Swabbing	
Length of Test 4 hrs	Tubing Pressure 0	Casing Pressure 320	Choke Size ---
Actual Prod. During Test 10 BO, 6 MCF, 60 BLW	Oil - Bbls. 60 BOPD	Water - Bbls. 360 BLWD	Gas - MCF 36 MCFD

#### GAS WELL

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