

OIL CONSERVATION DIVISION

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

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator DUGAN PRODUCTION CORP.	Well API No.
Address P.O. Box 420, Farmington, NM 87499	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input checked="" type="checkbox"/> Condensate <input type="checkbox"/>
Change of Gas Transporter Effective 2-1-90	
If change of operator give name and address of previous operator	

I. DESCRIPTION OF WELL AND LEASE

Lease Name State	Well No. 1	Pool Name, Including Formation Lybrook Gallup	Kind of Lease <u>State</u> , Federal or Fee	Lease No. B-11240
Location				
Unit Letter E	1980	Feet From The North	Line and 330	Feet From The West
Section 32	Township 24N	Range 7W	NMPM	Rio Arriba
County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Giant Refining Inc.	<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 Bannon Energy Inc.	<input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) 3934 FM 1960 West, Suite 240, Houston, TX 77068
If well produces oil or liquids, give location of tanks	Unit E	Sec. 32
	Twp. 24N	Rge. 7W
	Is gas actually connected? Yes	When? 5-25-82

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)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Deviations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations				Depth Casing Shoe				

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

. 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 be for full 24 hours.)		
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.

RECEIVED
MAY 07 1990

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

OIL CON. DIV.
Gravity of Condensate
DIST. 3

I. 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
Printed Name
5-2-90
Date

Geologist
Title
325-1821
Telephone No.

OIL CONSERVATION DIVISION

Date Approved **MAY 07 1990**By **Barry Chang**
SUPERVISOR DISTRICT #3

Title

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.

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