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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-85



Operator DUGAN PRODUCTION CORP.	
Address P O Box 208, Farmington, NM 87401	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner _____

Lease Name Grand Gulch		Well No. 2	Pool Name, Including Formation Basin Dakota	Kind of Lease State, Federal or Fee Fed	Lease No. NM25425
Location					
Unit Letter D	790	Feet From The North	Line and 790	Feet From The West	
Line of Section 6	Township 24 North	Range 7 West	, NMPM, Rio Arriba		County

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)			
Inland Corp.		P O Box 1528, Farmington, NM 87401			
Name of Authorized Transporter of Casinghead 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)			
Northwest Pipeline Corp.		3539 E 30th St., Farmington, NM 87401			
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 6	Twp. 24N	Rge. 7W	Is gas actually connected? No

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

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
			XX	XX					
Date Spudded 5-6-82	Date Compl. Ready to Prod. 6-11-82	Total Depth 7266' RKB		P.B.T.D. 7230' RKB					
Elevations (DF, RKB, RT, GR, etc.) 7165' GL; 7177' RKB	Name of Producing Formation Dakota	Top Oil/Gas Pay 6941'		Tubing Depth 7154' RKB					
Perforations 6941-7189, 22 holes				Depth Casing Shoe 7261' RKB					
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT					
12-1/4"	9-5/8"	211' RKB		136 cu.ft. to surface					
7-7/8"	4-1/2"	7261' RKB		2056.5 cu.ft. in 3 stgs					
	1-1/2"	7154' RKB							

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 (6-10-82)	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL			
Actual Prod. Test-MCF/D 225	Length of Test 24 hrs.	Bbls. Condensate/MMCF 52 BOPD	Gravity of Condensate 46
Testing Method (pitot, back pr.) swabbing	Tubing Pressure (Shut-in) 500 psi	Casing Pressure (Shut-in) 550 psi	Choke Size NA

VI. CERTIFICATE OF COMPLIANCE

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

Thomas A. Dugan (Signature)
Petroleum Engineer (Title)
6-14-82 (Date)

7-1-82 OIL CONSERVATION COMMISSION
JUL. 1 1982
APPROVED _____, 19____
BY Original Signed by CHARLES GHOLSON
DEPUTY OIL & GAS INSPECTOR, DIST. #3
TITLE _____

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.