5 NMOCD

Submit 5 Copies
Appropriate District Office
DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240

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

DISTRICT III

OIL CONSERVATION DIVISION

Energy, Minerals and Natural Resources Department .

State of New Mexico Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

1 File

		<u> </u>						377.37	4 51 31-				
Operator									Well API No.				
DUGAN PRODUCTION	CORP.												
P.O. BOX 420, FA	RMINGT	ON. N	м	87499									
Reason(s) for Filing (Check proper box)					On On	et (Please exp	dain)						
New Well	4	Change in	•		Cha	ande of	Ope	rat	or				
Recompletion	Oil Dry Gas Change of Operator Casinghead Gas Condensate Effective 3-1-91												
Walnut of company city page													
and address of previous operator Ke	rr-McGe	ee, P	.0.	Box 2	<u>5861, O</u>	klahoma	a Cit	ty,	<u> </u>	3125	•		
II. DESCRIPTION OF WELL	AND LEA	ASE											
Lease Name			Well No. Pool Name, Including Formation					Kind of Lease State, Federal or Fee			Lease Na		
Betty C 2/	l	6	Lу	brook	Gallup			SCALE,	recorator in	NM	014023		
Location	11	650	_		South Lin	. 331	Π.	_		Wes	+		
Unit Letter	_ :		_ Feet	From The	Dou on Lin	e 20d		Fe	et From The	WES	Line		
Section 31 Townsh	ip 241	N	Rang	ge 7W	, N	мрм,	Ric	<u> A</u>	rriba		County		
				> po > 1 / pov 1	7								
III. DESIGNATION OF TRAIN Name of Authorized Transporter of Oil		or Conder		ND NATU		e address to w	vhich appr	rmed	come of this	form is to b	e sent)		
Giant Refining	KX.	or coson			1								
Name of Authorized Transporter of Casin	ighead Gas	XX	or Dr	ry Gas	P.O. Box 256, Farmington, NM 874 Address (Give address to which approved copy of this form is to be sent)						: sent)		
Bannon Energy Inc					3934 F	M. 19					•		
If well produces oil or liquids,	Unit	Sec.	Twp	•	Is gas actuall	Is gas actually connected? Wi			, Hous	ton,	TX 7706		
give location of tanks.	1 - 1	31	24										
If this production is commingled with that IV. COMPLETION DATA	from any our	er lease or	роог, g	sive containing	nug order num	жа:							
		Oil Well	$\neg \gamma$	Gas Well	New Well	Workover	Deep	×en	Plug Back	Same Res'	v Diff Res'v		
Designate Type of Completion		İ					1			<u> </u>			
Date Spudded	Date Comp	i. Ready to	Prod.		Total Depth		P.B.T.D.						
Elevations (DF, RKB, RT, GR, etc.)	Name of Pr	oducina Fo	matio	Y 0	Top Oil/Gas Pay			Tubing Depth					
Elevations (DI-, RKB, KI, OK, ac.)	Name of Producing Formation			•			The second second						
Perforations							·····		Depth Casin	g Shoe			
					CEMENTING RECORD				DAONG OFFICE				
HOLE SIZE	CAS	ING & TU	BING	SIZE	DEPTH SET				SACKS CEMENT				
									·				
					<u> </u>								
V. TEST DATA AND REQUES OIL WELL (Test must be after t					he equal to or	exceed ton all	ountle fo	r shic	detailmer int	andellend h	Burne & Marie 2017		
OIL WELL (Test must be after to Date First New Oil Run To Tank	Date of Test) 100a	Ou and must	Producing Me					G E	IVE		
Date law low on hour to		Date of Yes											
Length of Test	Tubing Press	sure			Casing Pressu	re			Choke Size	JN - 5	1992		
			Water - Bbls										
Actual Prod. During Test	Oil - Bbls.			Water - Doin				"Off CON. DIV					
OAC WIELL	<u> </u>	,								DIST.	-3-		
GAS WELL Actual Prod. Test - MCF/D	Length of To	est			Bbls. Condens	эк∕MMCF	· •-		Gravity of C	ondensate			
		•											
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size						
	<u> </u>												
VI. OPERATOR CERTIFIC				NCE		IL CON	ISER	۱/Δ	TIONI	ואוכו	ON		
I hereby certify that the rules and regul Division have been complied with and				.		AL OON	4OLI1	1 4 1	I I OIY L		O/4		
is true and complete to the best of my l					Doto	Approve	a						
\bigcap \bigcap					Date	Approve	u				•		
John 1 Jan				By_						•			
Signification L. Jacobs		Geol	agie	st	"						······································		
Princed Name			Title		Title								
2-27-91		325-			''				*				
Date		Teler	t soode	NO.	11				-				

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.