## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

Dugan Production Corp.

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0161 R 10 UT 11	0#		Г	
BANTA PE				
FILE		Ŀ		
V.1.0.4.				
LAND OFFICE		Π		
TRANSPORTER	OIL			
	-			
OPERATOR				
PROGRATION OFF	1CE			

## OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

anmalaiad malls

able on new and recompleted wells.

All sections of this form must be filled out completely for allow-

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL

TION DIVISION  C 2088  MEXICO 87501  ALLOWABLE  DO ONL OIL AND MATURAL CAS						
ALLOW	/ABLE		C 09 1987			
ORT OIL	L AND NATURA	L GAS	ON. DN	<i>,</i>		
· · · · · · · · · · · · · · · · · · ·						
	Other (Please es	ipiain)				
Gas	F.C.C.	D	11 160	,~ <u>/</u>		
ndensate	Effe	ective Decemb	er 11, 173			
		-				
mation	1	ind of Lease		Lease No.		
llup	S	late, Federal or Fee	ederal	MM 5991		
and	1670	Feet From The	ast	<del></del>		
OWWC	, NMPM,		San Juan	County		
GAS						
Andress	(Give address to	which approved copy	of this form is t	o be sent)		
P.O.	Box 1429 B1	loomfield, NM	1 8/413			
		emington, NM		0 00 104,		
	ctually connected?	When				
Ye	25	7-1-	-83			
uve com	mingling order n	umber:				
		NSERVATION C	OIVISION			
APPR	OVED		,	19		
BY	F. January	Strang	# W			
TITLE	<u>Suraavi</u>	SION DISTRIC	T # 3			
T	his form is to b	e filed in complian	nce with RUL	E 1104.		
well.	his form must b	at for allowable for se accompanied by all in accordance w	a tabulation of	of the deviation		

Form C-104

Address					
P.O. Box 208 Farming	ton, NM	87499			
Reason(s) for filing (Check proper box)	,				Other (Please exp
New Well	<u>Chæng⊕ In</u>	Transporter of:			
Recompletion	<u>X</u> 011			y Gas	! <b>!</b>
Change in Ownership	Casir	nghead Gas	c.	ndensate	Effec
If change of ownership give name and address of previous owner					
·					
II. DESCRIPTION OF WELL AND	D LEASE				
Lease Name	1 1	Pool Name, Inc			Kir
June Joy		<u>Bisti Lov</u>	<u>ver Ga</u>	<u> 11up</u>	Sta
Location					
Unit Letter B : 790	Feet Fro.	m The North	L.in	and	1670 F
			_		
Line of Section 25 Tow	mahip 24N	Ro	inge l	OW	, NMPM,
III. DESIGNATION OF TRANSP			TURAL	GAS	· · · · · · · · · · · · · · · · · · ·
Name of Authorized Transporter of Off	A or C	ondensate		1	Give address to w
Conoco, Inc.					Box 1429 Blo
Name of Authorized Transporter of Cas	inghead Gas (X	•		1 -	
Dugan Production Corp.					Box 208 Farm
If well produces oil or liquids,	Unit   Sec.			Ye	
give location of tanks.	<u> B   25</u>	2411	10W	16	5
If this production is commingled wit	h that from an	y other lease	or pool,	give comm	ningling order nu
NOTE: Complete Parts IV and V	l on reverse c	ide if necessas	~		
		The ty meters and	· <b>.</b> .	: 1	
VI. CERTIFICATE OF COMPLIAN	NCE				OIL CON
I hereby certify that the rules and regulation been complied with and that the information			i	APPR	OVED
my knowledge and belief.	ii given B due an	ia complete to as	c best of	BY	A Same March 1
			j		A CONTRACTOR
				TITLE	SU RAVIS
-00	1				is form is to be
- Allena far	le.			1	this is a request
(Signat	west			weil, ti	his form must be
Production Repo	nt/Superv	isor			aken on the well
(Tule	•/				i sections of this new and recom
12-9-	37			l.	il out only Sect
(Date	1/		_	well ne	me or number, or
				Se	parate Forms C