

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 1-1-65

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

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 ☐ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name Mary Anne	Well No. 3	Pool Name, including Formation Bisti Gallup	Kind of Lease State, Federal or Fee	Lease No. Fed. NM10089
Location Unit Letter L : 790 Feet From The West Line and 1650 Feet From The South				
Line of Section 9 Township 24N Range 9W, NMPM, San Juan County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Giant Refining, Inc.	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 <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 L	Sec. 9
	Twp. 24N	Rge. 9W
	Is gas actually connected? No	

If this production is commingled with that from any other lease or pool, give commingling order number: Application pending DHC-43

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input checked="" type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Resrv. <input type="checkbox"/> Diff. Resrv. <input type="checkbox"/>		
Date Spudded 12-22-82	Date Compl. Ready to Prod. 8-24-83	Total Depth 6409'	P.B.T.D. 6346'
Elevations (DF, RKB, RT, GR, etc.) 6677' GL: 6689' RKB	Name of Producing Formation Gallup	Top Oil/Gas Pay 4891'	Tubing Depth 6314'
Perforations 4891-5365', 33 holes			Depth Casing Shoe 6409'

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	228' RKB	159 cf
7-7/8"	4-1/2"	6409' RKB	1734 cf in 2 stages
	2-3/8"	6314' RKB	

V. TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL

Date First New Oil Run To Tanks 2-10-83	Date of Test 2-14-83	Producing Method (Flow, pump, gas lift, etc.) swabbing - plan to pump	
Length of Test 9 hrs.	Tubing Pressure 0 psi	Casing Pressure 1050 psi shut in	Choke Size ---
Actual Prod. During Test	Oil-Bbls. 29 BOPD	Water-Bbls. 8 BWPD (load)	Gas-MCF 73 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

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.

OIL CONSERVATION COMMISSION

APPROVED

Original Signed by FRANK T. CHAVEZ

BY

SUPERVISOR DISTRICT #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 deepen well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of condition.

Jim L. Jacobs
Geologist

(Signature)

(Title)

9-21-83

(Date)