

OIL CONSERVATION DIVISION
P. O. BOX 2083
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

PR. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.A.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

I. Operator DUGAN PRODUCTION CORP. JUL 19 1985

Address P.O. Box 208, Farmington, NM 87499 OIL CON. DIV.

Reason(s) for filing (Check proper box) Effective 7-19-85

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Coastinghead Gas	

Other (Please explain) DIST. 3

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>July Jubilee</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Undesignated Gallup</u>	Kind of Lease State, Federal or Fee <u>Fed.</u>	Lease No. <u>NM24661</u>
Location				
Unit Letter <u>G</u>	: <u>1650</u> Feet From The <u>North</u> Line and <u>1520</u> Feet From The <u>East</u>			
Line of Section <u>30</u>	Township <u>24N</u>	Range <u>9W</u>	N.M.P.M.	San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <u>The Mancos Corp.</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 1320, Farmington, NM 87499</u>	
Name of Authorized Transporter of Coastinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Dugan Production Corp. (No Change)</u>	Address (Give address to which approved copy of this form is to be sent) _____	
If well produces oil or liquids, give location of tanks.	Unit <u>A</u> Sec. <u>13</u> Twp. <u>24N</u> Rge. <u>10W</u>	Is gas actually connected? <u>Yes</u> When <u>12/11/85</u>
If this production is commingled with that from any other lease or pool, give commingling order number:		<u>R-6826</u>

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Jim L. Jacobs (Signature)
Geologist (Title)
7-18-85 (Date)

OIL CONSERVATION DIVISION

APPROVED Frank J. [Signature] JUL 19 1985
BY _____
TITLE _____
SUPERVISOR DISTRICT # 3

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 deviated 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.
Separate Forms C-104 must be filed for each pool in multiple completed wells.