

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

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Water pool 2804661

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator DUGAN PRODUCTION CORP.	Well API No. 30 045 28961
Address P.O. Box 420, Farmington, NM 87499	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
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 Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name November 24	Well No. 2	Pool Name, Including Formation Bisti Lower Gallup Ext.	Kind of Lease State (Federal) or Fee	Lease No. NM 12374
Location Unit Letter L : 1980 Feet From The South Line and 990 Feet From The West Line Section 28 Township 24N Range 9W , NMPM , 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"/> Giant Refining 2804659	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. 2804660	Address (Give address to which approved copy of this form is to be sent) P.O. Box 420, Farmington, NM 87499	
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 28
	Twp. 24N	Rge. 9W
	Is gas actually connected? yes	
	When? 1/13/94	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well XX	Gas Well	New Well XX	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 11/22/93	Date Compl. Ready to Prod. 12/22/93		Total Depth 5347'		P.B.T.D. 5296'			
Elevations (DF, RKB, RT, GR, etc.) 6892' GL (est)	Name of Producing Formation Gallup		Top Oil/Gas Pay 5040'		Tubing Depth 5267'			
Perforations 5040-5273' (Gallup)					Depth Casing Shoe 5350'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		234'		177 cf			
7-7/8"	4-1/2"		5350'		1882 cf in 2 stages			
	2-3/8"		5267'					

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (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 Tank 12/22/93	Date of Test 1/4/94	Producing Method (Flow, pump, gas lift, etc.) Swabbing & Flowing	
Length of Test 8 hrs	Tubing Pressure ---	Casing Pressure 450	Choke Size ---
Actual Prod. During Test 15 BO, 40 BW*, 12 MCF	Oil - Bbls. 45 BOPD	Water - Bbls. 120 BLWPD*	Gas - MCF 36 MCFD

GAS WELL

Actual Prod. Test - MCF/D 1580	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. OPERATOR 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 above is true and complete to the best of my knowledge and belief.

Signature Jim L. Jacobs	Vice-President/ Geologist
Printed Name 1/13/94	Title 325-1821
Date	Telephone No.

OIL CONSERVATION DIVISION

Date Approved **JAN 13 1994**

By **[Signature]**
Title **SUPERVISOR DISTRICT #3**

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.