

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	
OIL	
GAS	
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator

DUGAN PRODUCTION CORP.

Address

P.O. Box 5820, Farmington, NM 87499-5820

Reason(s) for filing (Check proper box)

- ☐ New Well  
☐ Recompletion  
☐ Change in Ownership

Change in Transporter at:

- ☐ Oil  
☐ Gas  
☐ Dry Gas  
☐ Condensate

Other (Please explain)

FR. Cjo FR/pc  
 Redesignation of Pool  
 per NMOCD Order R-8769  
 Effective 11-1-88

If change of ownership give name  
 and address of previous owner

## I. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Pet Inc.	13	Ojo Fruitland Sand-PC	State, Federal or Fe-Navajo	14-20-603-2015
Location				
Unit Letter	1	1850	Feet From The South	Line and 790
Line of Section	35	Township	28N	Range 15W, NMPM, San Juan County

## II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Dugan Production Corp.	P.O. Box 5820, Farmington, NM 87499-5820
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When

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

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

## I. 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

11-30-88 (Title)

(Date)

OIL CONSERVATION DIVISION  
DEC 09 1988

APPROVED \_\_\_\_\_, 19\_\_\_\_  
 BY B. J. [Signature]  
 SUPERVISION 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 deepened well, this form must be accompanied by a tabulation of the deviation 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 multiply completed wells.