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

Revised 10-01-78
Format 06-01-83
Page 1

OLL CO 9 1987

Form C-104

REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Dugan Production Corp. Address Farmington, NM 87499 P.O. Box 238 Reason(s) for tiling (Check proper box) Other (Please expiain) New Well Change in Transporter of: X 011 Dry Gas Recompletion Effective December 11,1987 Change in Ownership Condensate Casinghead Gas If change of ownership give name and address of previous owner_ II. DESCRIPTION OF WELL AND LEASE Well No. | Pool Name, including Formation Lease No. Legse Name State, Federal or Fee Navajo NOO-C-South Bisti Gallup Jim Thorpe 1**420-5**825 Location 2060 East 1900 North Feet From The 10W San Juan 23N County NMPM Line of Section III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS And: ess (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Otl or Condensate P.O. Box 1429 Bloomfield, NM 87413 Conoco, Inc. Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas X or Dry Gas P.O. Box 208 Farmington, NM 87499 (no change) Dugan Production Corp. Is gas actually connected? Rge. Unit If well produces oil or liquids, give location of tanks. 23N 1 10W If this production is commingled with that from any other lease or pool, give commingling order number:

VI. CERTIFICATE OF COMPLIANCE

my knowledge and belief.

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

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

A
Federa Failey
Signatura
Production Report Supervisor
(Title)
\sim \sim \sim \sim

(Date)

OIL CONSERVATION DIVISION

APPROVED 19

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 allow able 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.