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1 Mancos Corp.

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

3094/12

RECEIVED

FEB 21 1986

OIL CON. DIV.

DIST. 3

Form C-104
Revised 10-01-78
Format 06-01-83

I. Operator

DUGAN PRODUCTION CORP.

Address

P O Box 208, Farmington, NM 87499

Reason(s) for filing (Check proper box)

☒ New Well ☐ Change in Transporter of: ☐ Oil ☐ Dry Gas

☐ Recompletion ☐ Casinghead Gas ☐ Condensate

☐ Change in Ownership

Other (Please explain)

If change of ownership give name
and address of previous owner _____**II. DESCRIPTION OF WELL AND LEASE**

Lease Name Squaw Valley	Well No. 1	Pool Name, including Formation South Bisti-Gallup	Kind of Lease State, Federal or Fee Federal-Navajo Allotted	Lease No. N00-C-1420-7310
Location Unit Letter <u>K</u> : <u>2310</u> Feet From The <u>South</u> Line and <u>2210</u> Feet From The <u>West</u>				
Line of Section <u>4</u> Township <u>23N</u> Range <u>10W</u> , NMPM, San Juan County				

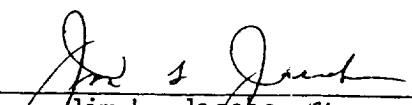
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Mancos Corp.	Address (Give address to which approved copy of this form is to be sent) P O Box 1320, 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 : <u>K</u> Sec. : <u>4</u> Twp. : <u>23N</u> Rge. : <u>10W</u> Is gas actually connected? <u>No</u> When _____

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

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

VI. CERTIFICATE OF COMPLIANCEI 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)

2-20-86

(Date)

2-6-86

OIL CONSERVATION DIVISION
FEB 06 1986

APPROVED _____, 19____

BY _____ Original Signed by CHARLES GHOLSON

TITLE _____ DEPUTY OIL & GAS INSPECTOR, DIST. #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 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.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		XX		XX					
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.			
1-12-86	2-06-86		4760'			4730'			
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth			
6580' GL; 6592' RKB	Gallup		4369'			4621'			
Perforations						Depth Casing Shoe			
4369' - 4647' - Gallup						4760'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"		8-5/8"		213'		159 cf			
7-7/8"		4-1/2"		4760'		1869 cf in 2 stages			
		2-3/8"		4621'					

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
2-06-86	2-18-86	Swabbing	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
8 hrs	---	350	---
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
18 BO, 75 BLW, 15 MCF	54 BOPD	225 BLWPD	45 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