4 NMOCD

ubmit 5 Copies
portopriate District Office
STRICT I
O. Box 1980, Hobbs, NM 88240

1 File State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

ISTRICT II
.O. Drawer DD, Arlesia, NIM 88210

OIL CONSERVATION DIVISION P.O. Box 2088
Santa Fe New Mexico 87504-2088

VISTRICT III 000 Rio Brazos Rd., Aziec, NM 87410

	Santa Fe, New M	lexico 8750	14-2088
REQUES	T FOR ALLOWA	BLE AND A	AUTHORIZATION TURAL GAS

	T	OTRA	NSPC	ORT OIL	AND NAT	URAL GA	S T Wall AF	l No.				
perator							1101172	Well API No. 30 039 05771				
DUGAN PRODUCTION CORP.								30 033 03771				
ddress	aton N	JA 87	499									
P.O. Box 420, Farmir					Other	(Please explained)	n) 1 /02					
ex Well	•	Change in	Transpo	rter of:	EIIE	ective 9/	1/ 52					
ecompletion	Oil		Dry Ga									
	Casinghead	Gas [_]	Conden	sate	tion Inc	3300	North Bu	tler, Fai	rmingto	on, NM 874		
change of operator give name Text	xaco Exp	olorat:	ion 8	Produc	ction inc	., 3300	NOL OIL DO					
	AND LEA	SE					1 20 1 1	1	1.0	ase No.		
. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including							State,(F	Kind of Lease State, Federal or Fee		288120		
Hall		2	2 Blanco PC South									
ocation P	8	390		" Sc	outh Line	and S	90 F∞	t From The	East	Line		
Unit Letter	_ :		. Feet Fi	rom The	LID	200				Country		
Section 28 Townshi	o 25	δN	Range	3w	, NN	ирм,	Rio A	riba		County		
38000					n a.c					_		
II. DESIGNATION OF TRAN	ISPORTE	R OF O	IL AN	D NATU	Address (Giv	e address to wh	ich approved	copy of this fore	n is to be se	서)		
Name of Authorized Transporter of Oil		or Conde	I Sare									
the state of Code	phead Gas		or Dry	Gas XX	Address (Giv	e address 10 wl	iich approved	copy of this fort	n is to be se	(וא		
Name of Authorized Transporter of Casin El Paso Natural Gas	Co.				P.O. B	ox 4990,	Farming	ton, NM	87499_			
If well produces oil or liquids,	Unit	Sec.	Twp	Rge.	1	y connected?	When	: nknown				
to leaving of lanks			٠		yes	ber:	14					
f this production is commingled with that	from any oth	er Jeane Of	poor, g	ive containing	ing older z							
V. COMPLETION DATA		Oil We	11 1	Gas Well	New Well	Workover	Deepen	Plug Back S	ame Res'v	Diff Res'v		
Designate Type of Completion	- (X)	i	ĺ		Total Depth	<u></u>	<u> </u>	P.B.T.D.		_1		
Date Spudded	Date Com	pl. Ready	to Prod.		Total Depui			1.5.1.5				
)	matus no l	Sormatio		Top Oil/Gas	Top Oil/Gas Pay		Tubing Depth				
Elevations (DF, RKB, RT, GR, etc.)	Name of P	Name of Producing Formation							Depth Casing Shoe			
Perforations								Depth Casing	SHOE			
, 617-61-2-3-3					CELEBET	NG RECOR	<u> </u>	<u> </u>				
		TUBING	, CAS	ING AND	CEMENT	NG RECOF		S	ACKS CEM	ENT		
HOLE SIZE	CA	SING &	IUBING	3126								
					ļ							
		1110	VADI	E .								
V. TEST DATA AND REQUE OIL WELL (Test must be after	EST FOR	ALLUY wal waluu	v of loa	c. d oil and mu	st be equal to a	r exceed top al	lowable for th	is depth or be fo	or full 24 ho	ws.)		
OIL WELL (Test must be after Date First New Oil Run To Tank	Date of T	est	2 0)		Producing N	lethod (Flow, p	ownp, gas lifi,	eic.)				
Date First New Oil Kun 10 Jank	1							Choke Size				
Length of Test	Tubing P	essin:			Casing Pres	sure			CEI	WER		
					Water - Bbl	<u>s.</u>		MCT	9 6 1			
Actual Prod. During Test	Oil - Bbl	S.						NA CE	P1 0 1	992		
GAS WELL	Length o	(Test			Bbls. Cond	ensate/MMCF	,	GLOJE, C	CON.	DIV		
Actual Prod. Test - MCF/D						781 - 1-1	1	Choke Size	DIST.	9		
Testing Method (pitot, back pr.)	Tubing F	ressure (S	hut-m)		Casing Pres	ssire (Shut-io)		a,oz oz				
i								_!				
VI. OPERATOR CERTIF	ICATE C	F CON	APLL/	ANCE		OIL CO	NSER\	ATION	DIVISI	ON		
and an interpretations of the Chi Conservation						CED 1 0 1992						
I hereby certify that the rules and regularious of the information given above Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					Da	Date Approved SEP 1 0 1992						
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Signiture			Geolo	paist			SUPE	RVISOR DI	STRICT	#3		
Jim L. Jacobs			Tit		Tit	le			_,			
9/9/92			325= Telepho		-	•	ø					
			, work	. ····	11							

- 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
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.

 2) Till out only Sections I II III and VI for changes of operator, well name or number, transporter, or other such changes.

