

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

B.K.

I.

DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL /		
	GAS		
OPERATOR	/		
PRORATION OFFICE			

Operator
ADORE OIL COMPANY
Address
Mr Morris B. Jones, 1223 Bank of New Mexico Bldg., Albuquerque, NM 87102

Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Dugan Federal A	Well No. 1	Pool Name, Including Formation Wildcat - Gallup	Kind of Lease State, Federal or Fee Fed.	Lease No. SF078868
Location Unit Letter F ; 1980 Feet From The North Line and 1980 Feet From The West Line of Section 29 Township 24N Range 8W , 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 Permian Corp.	Address (Give address to which approved copy of this form is to be sent) Box 1702, Farmington, NM 87417					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 29	Twp. 24N	Rge. 8W	Is gas actually connected? No	When -

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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 9-15-75	Date Compl. Ready to Prod. 11-3-75		Total Depth 5520		P.B.T.D. 5450			
Elevations (DF, RKB, RT, GR, etc.) 6726 Gr.	Name of Producing Formation Gallup		Top Oil/Gas Pay 5093		Tubing Depth 5354			
Perforations 5336 - 30, 5302 - 5296, 5281 - 77, 5249 - 47, 5243 - 41, 5218 - 03, 5125 - 21, 5101 - 5093. 47' 28" 2SPF					Depth Casing Shoe 5515			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12 1/4	CASING & TUBING SIZE 8 5/8		DEPTH SET 213		SACKS CEMENT 110 sxs - circ.			
7 7/8	5 1/2		5515		250 sxs-1st stage			
	DV Tool		3997		100 sxs-2nd stage			
	2 3/8 tubing		5354					

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 Tanks 11-3-75	Date of Test 11-14-75	Producing Method (Flow, pump, gas lift, etc.) Swab and flow	
Length of Test 7 hours	Tubing Pressure 150	Casing Pressure 510	Choke Size 24/64
Actual Prod. During Test 114 Bbls	Oil - Bbls. 110	Water - Bbls. 4	Gas - MCF TST

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

RECEIVED
NOV 20 1975
OIL CON. COM
DIST. 3

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Original Signed by
MORRIS B. JONES

Morris B. Jones, Engineer

November 17, 1975

(Signature)

(Title)

(Date)

OIL CONSERVATION COMMISSION

APPROVED **NOV 20 1975**

BY **Original Signed by A. E.**

TITLE **SUPERVISOR 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 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 multiple