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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.

Operator Dugan Production Corp.		
Address Box 234, Farmington, NM 87401		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name Chaco	Well No. 3	Pool Name, including Formation Undesignated Greenhorn Mancos Gallup	Kind of Lease State, Federal or Fee Federal	Lease No. NM 2337
Location Unit Letter <u>F</u> ; <u>1700</u> Feet From The <u>North</u> Line and <u>1450</u> Feet From The <u>West</u>				
Line of Section <u>1</u> Township <u>24N</u> Range <u>9W</u> , NMPM, <u>San Juan</u> 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"/> Inland Corporation	Address (Give address to which approved copy of this form is to be sent) Box 1528 , Farmington, NM 87401					
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. 1	Twp. 24N	Rge. 9W	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 2-24-78	Date Compl. Ready to Prod. 4-3-78		Total Depth 6400'		P.B.T.D. 6217'			
Elevations (DF, RKB, RT, GR, etc.) 6583' GR 6594' RKB	Name of Producing Formation Greenhorn - Mancos - Gallup		Top Oil/Gas Pay 5188'		Tubing Depth 6120' RKB			
Perforations 6151-68', 5121-35', 5836-46', 5720-30', 5454-64', 5384-94', 5354-64', 5298-5308', 5213-23', 5188-98'					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12-1/4" 7-7/8"	CASING & TUBING SIZE 8-5/8" 4-1/2"		DEPTH SET 230' RKB 6379' RKB		SACKS CEMENT 140 sx 1760 cu ft			

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)

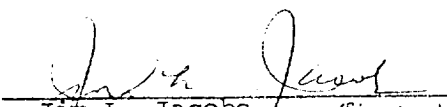
Date First New Oil Run To Tanks 4-3-78	Date of Test 4-4-78	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs.	Tubing Pressure 35	Casing Pressure 450	Choke Size ---
Actual Prod. During Test	Oil-Bbls. 65	Water-Bbls. 0	Gas-MCF 70

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

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.

  
Jim L. Jacobs (Signature)  
Geologist  
(Title)  
4-5-78  
(Date)

OIL CONSERVATION COMMISSION  
5-17-78  
APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Original Signed by A. R. Kendrick  
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.