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

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.R.

Operator Dugan Production Corp.	
Address Box 234, Farmington, NM 87401	
Reason(s) for filing (Check proper box)	
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"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Blanco Wash	Well No. 7	Pool Name, Including Formation Whitewash Mancos Dakota	Kind of Lease State, Federal or Fee	Lease No. Indian 14-20-0603-1408
Location				
Unit Letter E	1450	Feet From The North	Line and 860	Feet From The West
Line of Section 11	Township 24N	Range 9W	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"/> Basin, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2297, Midland, TX 79702	
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 E	Sec. 11
	Twp. 24N	Rge. 9W
	Is gas actually connected?	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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 9-2-78	Date Compl. Ready to Prod. 10-20-78		Total Depth 6355'		P.B.T.D. 6317'			
Elevations (DF, RKB, RT, GR, etc.) 6622' GR	Name of Producing Formation Gallup Greenhorn		Top Oil/Gas Pay 5106		Tubing Depth 6102'			
Perforations 5106-16. 5128-38, 5224-34, 5278-88					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4	8-5/8"		214'		135 SX			
7-7/8"	5-1/2"		6360' RKB		815 SX			
	2-3/8"		6102' RKB					

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)

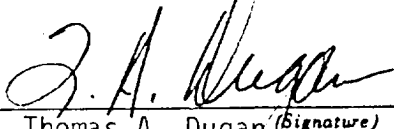
Date First New Oil Run To Tanks 11-8-78	Date of Test 10-20-78	Producing Method (Flow, pump, gas lift, etc.) Swabbing	
Length of Test 5 hrs	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 10 Bbls	Oil-Bbls. 10 bbls	Water-Bbls. frac	Gas-MCF TSTM

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

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.



Thomas A. Dugan (Signature)
Petroleum Engineer
(Title)

11-6-78
(Date)

OIL CONSERVATION COMMISSION

APPROVED NOV 10 1978, 19

BY Original Signed by A. R. Landrick

TITLE SUPERVISOR DIST. #1

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 multiply completed wells.