

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
REGISTRATION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 00-01-83
Page 1REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

31

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:
☐ Recompletion	☐ Oil
☐ Change in Ownership	☐ Casinghead Gas
	☐ Dry Gas
	☒ Condensate
Other (Please explain) Effective June 1, 1985	

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Harvey	Well No. 2	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee Fed.	Lease No. NM 10755
Location Unit Letter <u>F</u> ; <u>1640</u> Feet From The <u>North</u> Line and <u>1850</u> Feet From The <u>West</u> Line of Section <u>20</u> Township <u>24N</u> Range <u>9W</u> , NMPM, <u>San Juan</u> County				

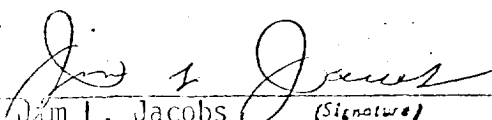
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒	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 ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)			
El Paso Natural Gas Co. (No Change)				
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 20	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:

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

VI. CERTIFICATE OF COMPLIANCE

I 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)

May 29, 1985

(Date)

OIL CONSERVATION DIVISION

 APPROVED MAY 31 1985, 19
 BY Frank J. [Signature]
 TITLE SUPERVISOR DISTRICT

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 deviated
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 change of own-
er, well name or number, or transporter, or other such change of title.Separate Forms C-104 must be filed for each pool in multi-
completed wells.