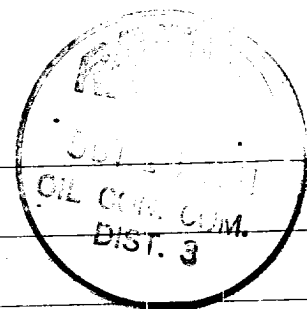


OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS



Dugan Production Corp.

P O Box 208, Farmington, NM 87401

(1) For Filing (Check proper box)

Oil ☐
Gas ☐
In Ownership ☐

Change in Transporter of:

Oil ☐
Casinghead Gas ☐

Dry Gas ☐
Condensate ☐

Other (Please explain)

EPG.

* CORRECTION OF TRANSPORTER

Name of ownership give name
Address of previous owner

DESCRIPTION OF WELL AND LEASE

Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Sixteen G's	#3	Bisti Lower Gallup	State, Federal or Free Fed	NM 25433

Well Letter C : 660' Feet From The North Line and 1950' Feet From The West Corner of Section 7 Township 24N Range 9W . NMPM . San Juan County

DECLARATION OF TRANSPORTER OF OIL AND NATURAL GAS

I, Inland Corp. of Dugan Production Corp. do hereby certify that the oil and gas transported by me is from the well described above and is not from any other source.

Unit C Sec. 7 Twp. 24N Rge. 9W

Address (Give address to which approved copy of this form is to be sent)

P O Box 1528, Farmington, NM 87401

Address (Give address to which approved copy of this form is to be sent)

P O Box 208, Farmington, NM 87401

Is gas actually connected? Yes

If production is commingled with that from any other lease or pool, give commingling order numbers:

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Reservoir	Drill. Res.
(X)	XX		XX					
Spaced	Date Compl. Refr. to Pipe	Total Depth	P.S.T.D.					
7-7-81	8-6-81	6485'	6230'					
Notes (DF, RAS, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
6845' GL	Gallup	5406'	5497'					
Producing Formations			Depth Casing Shoe					
5406-18 & 5438-52			6492'					

TUBING, CASING, AND CEMENTING RECORD

MOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/2"	8-5/8"	207' RKB	135 sx Class B 2% CaC
7-7/8"	4-1/2"	6492'	900 sx in 2 stages
	2-3/8"	5497' RKB	

TEST DATA AND REQUEST FOR ALLOWABLE WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top of casing for this depth or be for full 24 hours)

First Test Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
	8-11-81	pumping
Time of Test	Tubing Pressure	Casing Pressure
4 hrs	flow-swb 0	flow-swb - 360
	SI 880 psi	SI 910 psi
Rate of Prod. During Test	Oil - Bbls.	Water - Bbls.
	10	frac
		13 est.

WELL

Rate of Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Flow Method (Flow, back pr.)	Tubing Pressure (Test-In)	Casing Pressure (Test-In)	Choke Size

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.

Thomas A. Dugan

(Signature) Thomas A. Dugan

OIL CONSERVATION DIVISION

OCT 13 1981

APPROVED

BY Frank T. Chavez

TITLE SUPERVISOR DISTRICT # 3

This form is to be filled 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 filing.