THE OF MOUNTAINED	
STATE OF NEW MEXICO	Form C-104
IERGY AND MINERALS DEPARTMENT	Revised 10-01-78
DO, OF EPPLEP REELIVED	Format 06-01-83
DISTRIBUTION OIL CONSERVAT	TION DIVISION Page 1
P. O. BOX	
SANTA FE, NEW	MEXICO 87501
	DEC 06 1985
AND DEFICE	06 1985
REQUEST FOR	ALLOWABLE AND AND ALLOWABLE
PENATON ANI	
	ORT OIL AND NATURAL GAS DISTERS OF THE
AUTHORIZATION TO TRANSPO	5. S
perator December 2011 CORP	
DUGAN PRODUCTION CORP.	
Address	•
P.O. Box 208, Farmington, NM 87499	
leason(s) for filing (Check proper box)	Other (Please explain)
New Well Change in Transporter of:	
<b>M</b> • 1 • 1 • 1 • 1 • 1 • 1 • 1 • 1 • 1 •	Can Effective 12/5/85
Recomplation A Oil Cosinghead Cas Con	nden=ale
Change in Ownership Casinghead Cas Con	
change of ownership give name nd address of previous owner	
TO A STORY AND ANACH	
I. DESCRIPTION OF WELL AND LEASE   Well No.   Pool Name, Including For	Imation   Kind of Lease . Lease No
Ced≠e traume	Sign Federal or Fee
July Jubilee 2 Bisti Lower Ga	allup State, 7 seeral of 7 see. NM24661
Location	The state of the s
Unit Letter D : 790 Feet From The North Line	and 790 Feel From The West
Unil Letter	• •
Township 24N Range C	9W , NMPM, San Juan County
Line of Section 29 Township 24N Range	•
THE THE PART OF THE ANGUSTED OF OH AND NATIONAL	GAS
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Oil X or Condensate	1:
The Mancos Corp.	1901 Mojave, Farmington, NM 87401  Address (Give address to which approved copy of this form is to be sent).
Name of Authorized Transporter of Casinghead Gas or Dry Gas	Address (Cibe address to mitth approve
Dugan Production Corp. (No Change)	
Hott Sec. Twp. Rgs.	Is gas actually connected? When
If well produces oil or liquids,	1
give location at tuite.	
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.	
	OIL CONSERVATION DIVISION
VI. CERTIFICATE OF COMPLIANCE	[]
	DEC - 6 198519
I hereby certify that the rules and regulations of the Oil Conservation Division have	AFFROVED
been complied with and that the information given is true and complete to the best of	BY
my knowledge and belief.	
	TITLE SUPERVISOR DISTRICT 38 3
$\cap$	ll •
$X \rightarrow (1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1$	This form is to be filed in compliance with MULE 1104.
/ for to xark.	If this is a request for allowable for a newly drilled or despe-
Alim I. Jacobs (Signature)	well, this form must be accompanied by a tabulation of the deviat
Geologist	tests taken on the well in accordance with RULE 111.
(Title)	All sections of this form must be filled out completely for all
	able on new and recompleted wells.
12/5/85	
	Fill out only Sections I. II, III, and VI for changes of own
(Date)	well name or number, or transporter, or other such change of conditi
(Date)	Fill out only Sections I, II, III, and VI for change of conditional name or number, or transporter, or other such change of conditional separate Forms C-104 must be filed for each pool in multi-completed wells.