SY AND MINERALS DEPARTMENT 4 NMUCD 1 Glant I FILE Revised 10-1-78 OIL CONSERVATION DIVISION -----P. O. BOX 2088 011 7 111 UT 104 SANTA FE, NEW MEXICO 8750 J 8.4.8. LAND OFFICE REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS DPERATOR PROMATION OFFICE DUGAN PRODUCTION CORP. ddress P O Box 208, Farmington, NM 87499 Other (Please explain) Reason(s) for filing (Check proper box)  $\mathbf{x}$ Dry Gas Recompletion Casinghead Gas Change in Ownership I change of ownership give name nd address of previous owner. DESCRIPTION OF WELL AND LEASE.

Well No. Pool Name, Including Formation NM25440 State, Federal or Fee Fed Basin Dakota #1E Big Eight Location 1850 South Line and \_ Feet From The 890 Feet From The San Juan 9 W , NMPM, Range Township 24 N 8 DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil XX P O Box 256, Farmington, NM 87499 Giant Refining, Inc. Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas When Is gas actually connected? Sec. Unit If well produces oil or liquids, give location of tanks. No 8 24N 9W 0 f this production is commingled with that from any other lease or pool, give commingling order number: R-6825 Plug Back | Same Res'v. Diff. Res'v. Deepen Gas Well Oil Well Designate Type of Completion - (X) XX XX P.B.T.D. Date Compl. Ready to Prod. Total Depth Date Spudded 6330 \*\* 6443' RKB 78-20-82 3-8-82 Tubing Depth Top Oil/Gas Pay Name of Producing Formation Elevetions (DF, RKB, RT, GR, etc.) 6692 GL; 6704 RKB 6275 6288 Dakota Depth Casing Shoe \*(6375-87 & 6388-94 PB w/ Bridge plug & cement) Perforations 6288-6300, 12 holes 6443' RKB TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE 171' RKB 6443' RKB <u> 136\_cf</u> 9-5/8" 12-1/4" 1965 cf in 2 stages 4-1/2" 7-7/8" 6275 2-3/8" (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) TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date of Test Date First New Oil Run To Tanks flowing 7-31-82 7-20-82 Choke Size Casing Pressure Tubing Pressure Length of Test none - swab test 725 psi -0-8 hrs Water - Bbls. Actual Prod. During Test OII - Bbls. 216 MCFGPD 90 bbls frac water 3 BOPD GAS WELL Gravity of Condensate Bbls. Condensate/MMCF I ength of Test Actual Prod. Test-MCF/D Cosing Pressure (Shut-in) Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) OIL CONSERVATION DIVISION CERTIFICATE OF COMPLIANCE 6 1982

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

(Signature) dim L. Jacobs Géologist

10-5-82

(Title)

(Dose)

BY\_\_\_\_

SUPERVIOUR DISTRICT # 3

TITLE \_

This form is to be filed in compliance with MULE 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 allowe on new and recompleted wells.

Fill out only Sections I. II. III. and VI for changes of owner, ell name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply