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Appropriate District Office
DISTRICT 4.NMOCD P.O. Box 1980, Hobbs, NM 88240 File

DISTRICT II
P.O. Drawer DD, Aricsia, NM 88210

Energy, Minerals and Natural Resources Department

Revised 1-1-89 See Instructions at Bottom of Page

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

I.

DISTRICT III
1000 Rio Brazos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

								API NO.				
Dugan Production Co	orp.							<u>30_039_059</u>	961	······		
Address	-											
P.O. Box 420, Farmi	ngton.	NM 8	7499_		<u> </u>	et (Please expl	ais)					
Reason(s) for Filing (Check proper box)		C	in Transpo	~		ange of		<b>-</b>				
New Well	Oil	-,-	Dry G			_	_	•				
Recompletion  Change in Operator		Oil Dry Gas Effective 11/1/92 Casinghead Gas Condensate										
					tion Inc	3300	North B	tler Far	minaton	. NM 87		
and address of previous operator Tex	aco Exp	plorat	ion &	Produc	tion inc	., 3300	NOT CIT DO	utler, Far	mingcon	, INFI O7		
II. DESCRIPTION OF WELL	AND LE	EASE										
Lease Name		Well No	Pool N	ame, locludi	ing Formation			of Lease Na.		e No.		
V.R. Nordhaus		1	l B	allard	Pictured Cliffs State,			Federal or Fee NM 03602		12		
Location												
Unit Letter D	•	890	Feet Fr	on The N	orth Lin	and 890	Fe	et From The	West	Line		
om tour												
Section 19 Townshi	ip 25N		Range	7W	, N	MPM, R	<u>lio Arri</u>	ba		County		
					<b></b>							
III. DESIGNATION OF TRAN	ISPORTI			D NATU	RAL GAS		Lich armenia	copy of this form	ic to be sent			
Name of Authorized Transporter of Oil		or Coude	ensate		Vocass four	; DERD ESS TO WA	исп аругона	copy of this join	, <b>B</b> & 50 30 - ,			
			P-	Co. (379)	Add-se (Ci-	adtess to mi	hick announce	com of this for-	is to be sent			
	ame of Authorized Transporter of Casinghead Gas or Dry Gas XX						Address (Give address to which approved copy of this form is to be sent) P.O. Box 4990, Farmington, NM 87499					
	El Paso Natural Gas Co.					Is gas actually connected? When ?						
If well produces oil or liquids, ive location of tanks.	] Unit	Sec.	Twp.	1 vac	yes	Commence.	1	•				
this production is expremingled with that	(mm any of	her lesse o		e comminal	J≐							
V. COMPLETION DATA	Hom any on	ner rease or	i poot, go	COMMINICA	ING CION DOLL							
		Oil Wel	11 1 (	Jas Well	New Well	Workover	Deepen	Plug Back Sa	me Res'v	Diff Res'v		
Designate Type of Completion	- (X). "		· i ·	•	i		İ	lL	1	. •		
Date Spudded	Date Com	ipl. Ready I	to Prod.		Total Depth			P.B.T.D.				
•												
levations (DF, RKB, RT, GR, etc.)	Name of F	Producing F	ng Formation		Top Oil/Gas Pay		Tubing Depth					
								Depth Casing Shoe				
erforations								Depth Casing S	noe			
						IG PECOP		İ				
					CEMENTI	NG RECOR	<u>D</u>	CA	KS CEMEN			
HOLE SIZE	CA	ISING & T	UBING S	SIZE		DEPTH SET		SAI	AS CEMEN	<u> </u>		
	<del></del>							<del> </del>				
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, TEST DATA AND REQUES	ST FOR	ALLOW	ABLE		I			1				
) IL WELL (Test must be after to	ecovery of t	otal volum	e of loads			exceed top alle						
	7			ou ana must	be equal to or	Extension one	iwable for the	depth of befor	fill 24 hours.)			
Date First New Oil Run To Tank	Date of Te		e of roas c	od and must	be equal to or Producing Me	thod (Flow, pu	mp, gas lift, e	depth of befor	fill 24 hours.)			
Date First New Oil Run To Tank	Date of Te		e oy roas (	ou and must	Producing Me	thod (Flow, pu	mp, gas lift, e	ic.) [A] =	₩/			
	Date of Te	est		od and must	be equal to or Producing Me Casing Pressu	thod (Flow, pu	mable for the mp, gas lift, e	ic.) [A] =	₩/			
		est	e oj ivas c	od and mus!	Producing Me	thod (Flow, pu	mable for the imp, gas lift, e	Choice Size	₩/			
ength of Test		स्त्रमाट	· cy nas c	ou and must	Producing Me	thod (Flow, pu	owabie for thu mp, gas lift, e	ic.) [A] =	₩/			
Date First New Oil Run To Tank  Length of Test  Actual Prod. During Test	Tubing Pro	स्त्रमाट	· oj nas c	ou and must	Producing Me	thod (Flow, pu	mable for the	Choice Size	Ú./			
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Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test - MCF/D	Tubing Pro	स्ड्राप्ट		ard must	Producing Me Casing Pressu Water - Bbls	thod (Flow, pu	mable for thu	Challe Size	OV1. 0.00 CON. Dial. 4			
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Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test - MCF/D  esting Method (pilot, back pr.)	Tubing Pro	essure  Test ressure (Shu			Producing Me Caxing Pressu Water - Bbls. Bbls. Conden Casing Pressu	re sate/MMCF ire (Shut-in)	mp, gas lift, e	Choke Size  Gas- MCF L  Gravity of Cond	CON. DIST.	Div.		
ength of Test  SAS WELL  CITED Prod. Test - MCF/D  Esting Method (pitot, back pr.)  COPERATOR CERTIFIC	Tubing Pro Oil - Bbla. Length of Tubing Pro	Test F COM	 u-in) PLIAN		Producing Me Caxing Pressu Water - Bbls. Bbls. Conden Casing Pressu	re sate/MMCF ire (Shut-in)	mp, gas lift, e	Choice Size	CON. DIST.	Div.		
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INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.