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1 File

1 Celsius-Denver 1 Celsius-SLC

1 Giant

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GASForm C-104  
Revised 10-01-78  
Format 05-01-83  
Page 1

Operator <b>DUGAN PRODUCTION CORP.</b>	
Address <b>P O Box 208, Farmington, NM 87499</b>	
Reason(s) for filing (Check proper box)	
<input checked="" type="checkbox"/> New Well	Change in Transporter of:
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas
	<input type="checkbox"/> Dry Gas
	<input type="checkbox"/> Condensate
Other (Please explain)	

If change of ownership give name  
and address of previous owner

## II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Divide</b>	Well No. <b>3</b>	Pool Name, including Formation <b>Gavilan Mancos</b>	Kind of Lease State, Federal or Fee <b>Fed.</b>	Lease No. <b>NM 28709</b>
Location				
Unit Letter <b>K</b>	<b>1780</b>	Feet From The <b>South</b>	Line and <b>2120</b>	Feet From The <b>West</b>
Line of Section <b>35</b>	Township <b>26N</b>	Range <b>2W</b>	<b>NMPM, Rio Arriba</b>	County

## III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <b>Giant Refining, Inc.</b>	Address (Give address to which approved copy of this form is to be sent) <b>Box 256, Farmington, NM 87499</b>	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <b>Dugan Production Corp</b>	Address (Give address to which approved copy of this form is to be sent) <b>P O Box 208, Farmington, NM 87499</b>	
If well produces oil or liquids, give location of tanks.	Unit <b>K</b>	Sec. <b>35</b>
	Twp. <b>26N</b>	Rge. <b>2W</b>
	Is gas actually connected?	When
	<b>Yes</b>	<b>12-26-86</b>

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.

*John D. Roe*  
\_\_\_\_\_  
Jim L. Jacobs (Signature)  
\_\_\_\_\_  
Geologist (Title)  
\_\_\_\_\_  
12-29-86 (Date)

12-30-86  
OIL CONSERVATION DIVISION  
DEC 26 1987  
APPROVED \_\_\_\_\_  
Original Signed by CHARLES CHILSON  
BY \_\_\_\_\_  
TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3

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 deviation  
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 changes of owner,  
well name or number, or transporter, or other such change of condition.Separate Forms C-104 must be filed for each pool in multiply  
completed wells.

#### IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		XX		XX					
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.			
10-13-86	12-26-86		8150'			8000'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth			
7695' GL	Mancos		7130'			7619'			
Perforations						Depth Casing Shoe			
7130' - 7923' Mancos						8146' RKB			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			
12-1/4"	9-5/8" OD		226' RKB			147.5 cf			
7-7/8"	5-1/2"		8146' RKB			2519 cf in 3 stages			
	2-3/8" OD		7619'						

#### V. TEST DATA AND REQUEST FOR ALLOWABLE (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)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
12-26-86	12-27-86	gas lift	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
3 hrs	50 psig	750 psig	none
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
48 BO, 25 BLW, 31 MCF	384 BOPD	200 BLWPD	248 MCFD

#### GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size