



OIL CONSERVATION COMMISSION

STATE OF NEW MEXICO
1000 RIO BRAZOS RD. - AZTEC

87410

LAND COMMISSIONER
PHIL R. LUCERO



STATE GEOLOGIST
EMERY C. ARNOLD

DIRECTOR
JOE D. RAMEY

January 20, 1977

Jerome P. McHugh
Dugan Production Corporation
P. O. Box 234
Farmington, New Mexico 87401

Re: Jerome P. McHugh
June #1
B-28-28N-3W

Gentlemen:

Form C-104 for the subject well received in this office January 20, 1977, is approved for only sixty (60) days or until March 21, 1977.

This approval is with the well completed with the Pictured Cliffs and Mesaverde zones commingled within the well bore.

The well shall be either approved for downhole commingling or be recompleted as a multiple completion on or before March 21, 1977.

This office shall be notified in writing whenever the well is to be shut-in longer than seven (7) days at any time and explaining the reason of such shut-in.

If there are questions, please contact us.

Yours very truly,

A. R. Kendrick
Supervisor, District #3

ARK:no

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL /	
	GAS /	
OPERATOR		
PRORATION OFFICE		

I. Operator Jerome P. McHugh
Address Box 234, Farmington, NM 87401
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>June</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Devil's Pictured Cliffs</u> <u>Blanco Mesaverde</u>	Kind of Lease State, Federal or Fee <u>Indian</u>	Lease No. <u>Cont 84</u>
Location Unit Letter <u>B</u> ; <u>1110</u> Feet From The <u>North</u> Line and <u>1560</u> Feet From The <u>East</u> Line of Section <u>28</u> Township <u>T28N</u> Range <u>3W</u> , NMPM, <u>Rio Arriba</u> 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"/> <u>Plateau, Inc.</u>	Address (Give address to which approved copy of this form is to be sent) <u>Box 108, Farmington, NM 87401</u>	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> <u>Northwest Pipeline Corporation</u>	Address (Give address to which approved copy of this form is to be sent) <u>Box 90, Farmington, NM 87401</u>	
If well produces oil or liquids, give location of tanks.	Unit	Sec. Twp. Rge.
		Is gas actually connected? When

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded <u>11-20-76</u>	Date Compl. Ready to Prod. <u>12-30-76</u>		Total Depth <u>6106'</u>		P.B.T.D. <u>6058'</u>			
Elevations (DF, RKB, RT, GR, etc.) <u>6935' GR</u>	Name of Producing Formation <u>Mesaverde</u>		Top Oil/Gas Pay <u>3630'</u>		Tubing Depth <u>5940</u>			
Perforations <u>3630 to 3825 Pictured Cliffs</u> <u>5614 3630-6027' Mesaverde</u>				Depth Casing Shoe				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<u>12-1/4"</u>	<u>8-5/8"</u>		<u>265'</u>		<u>135</u>			
<u>7-7/8"</u>	<u>5-1/2"</u>		<u>6105'</u>		<u>450 cu ft (1st stage)</u>			
	<u>1-1/4"</u>		<u>5940'</u>		<u>900 cu ft (2nd stage)</u>			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(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.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D <u>565 MCFGPD after flowing 18 hours</u>	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
		<u>1424</u>	

VI. CERTIFICATE OF COMPLIANCE

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

Thomas A. Dugan
(Signature)
Engineer
(Title)
1-19-77
(Date)

OIL CONSERVATION COMMISSION

APPROVED JAN 20 1977, 19
BY Original Signed by A. R. Kendrick
TITLE SUPERVISOR 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 allowable 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 multiple.