

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.A.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87504Form C-104
Revised 10-01-78
Format 06-01-83
Page 1RECEIVED
FEB 12 1986
OIL CON. DIV.
DIST. 3REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator DUGAN PRODUCTION CORP.	
Address P O Box 208, Farmington, NM 87499	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change transporter from Giant Refining to The Mancos Corp. effective 2-11-86.
Change in Transporter of: <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Rex	Well No. 2	Pool Name, including Formation Undesignated Gallup	Kind of Lease State, Federal or Fee Federal	Lease No. SF078009C
Location				
Unit Letter D	990	Feet From The North	990	Feet From The West
Line of Section 18	Township 27N	Range 13W	San Juan 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"/> The Mancos Corp.	Address (Give address to which approved copy of this form is to be sent) P O Box 1320, Farmington, NM 87499
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas (NO CHANGE)	Address (Give address to which approved copy of this form is to be sent) P O Box 4990, Farmington, NM 87499
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit: D Sec.: 18 Twp.: 27N Rge.: 13W	No

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.


 F.L. "Bud" Crane (Signature)

(Title)

Production Superintendent

(Date)

2-11-86

OIL CONSERVATION DIVISION

FEB 12 1986

APPROVED _____

BY _____

TITLE _____

SUPERVISOR DISTRICT #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 filled for each pool in multiply completed wells.