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**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

I. Operator
Jerome P. McHugh

Address
Box 234, Farmington, New Mexico 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)
Change of Operator from Dugan Production Corp. to Jerome P. McHugh - Effective 7-23-73

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Nassau	Well No. 5	Pool Name, Including Formation Wildcat PC	Kind of Lease State, Federal or Fee Federal	Lease No. NM 12030
Location Unit Letter <u>A</u> : <u>820</u> Feet From The <u>North</u> Line and <u>1130</u> Feet From The <u>East</u> Line of Section <u>36</u> Township <u>27N</u> Range <u>12W</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> None	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 990, Farmington, New Mexico 87401	
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: _____

V. 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 4-2-73	Date Compl. Ready to Prod. 4-28-73	Total Depth 1560		P.B.T.D. 1544				
Elevations (DF, RKB, RT, CR, etc.) 6023 GR	Name of Producing Formation Pictured Cliffs	Top Oil/Gas Pay 1528		Tubing Depth 1535				
Perforations 1528-38 One jet/ft				Depth Casing Shoe				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT				
7-7/8"	5-1/2"	80 GR		12 sacks				
4-3/4"	2-7/8"	1556 GR		75 sacks				
	1-1/4"	1535 GR						

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 (If 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 918 AOF	Length of Test 3 hrs	Bbls. Condensate, MCF	Gravity of Condensate
Testing Method (pitot, back pr.) One point back press.	Tubing Pressure (shut-in) 328	Casing Pressure (shut-in) 410	Choke Size 5/8"

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.

Original signed by T. A. Dugan

(Signature)

Engineer

(Title)

8-3-73

(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 7 1973, 19____

Original Signed by Emery G. Arnold

BY _____

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.