

OIL CONSERVATION DIVISION

Revised 10-1-78

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES DESIRED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL <input type="checkbox"/> GAS <input type="checkbox"/>
OPERATOR	
PRODUCTION OFFICE	

1. Operator
DUGAN PRODUCTION CORP.

Address
P O Box 208, Farmington, NM 87401

Reason(s) for filing (Check proper box) Other (Please explain)

New Well ☒ Change in Transporter of: Oil ☐ Dry Gas ☐
 Recompletion ☐ Casinghead Gas ☐ Condensate ☐
 Change in Ownership ☐

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

1. DESCRIPTION OF WELL AND LEASE

Lease Name La Lee Ann	Well No. 3	Pool Name, Including Formation WAW FR PC	Kind of Lease State, Federal or Fee Fed	Lease No. NM 37913
Location Unit Letter N ; 990 Feet From The South Line and 1650 Feet From The West Line of Section 28 Township 27N Range 13W , NMPM, San Juan County				

1. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	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"/>	Address (Give address to which approved copy of this form is to be sent)	
EI Paso Natural Gas Co.	P O Box 990, Farmington, NM 87401	
If well produces oil or liquids, give location of tanks.	Unit	Sec. Twp. Rge. Is gas actually connected? When
		No

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

1. 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 3-31-80	Date Compl. Ready to Prod. 6-7-82	Total Depth 1390'	P.B.T.D. 1336'					
Elevations (DF, RKB, RT, GR, etc.) 6097' GL, GL = RKB	Name of Producing Formation Pictured Cliffs	Top Oil/Gas Pay 1312'	Tubing Depth 1406'					
Perforations 1312-1324'	Depth Casing Shoe 1382' GL							

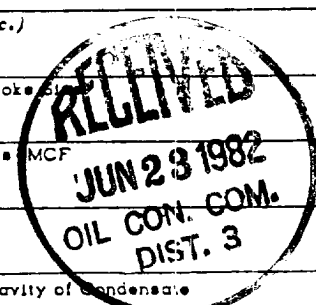
TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
8-3/4	7"	75' GL	35 sx class B
5"	2-7/8"	1382' GL	(75 sx 2% Lodense w/ 1/4# cf/sk & 50 sx class B w/ 1/4# cf/sk
	1-1/4"	1306' GL	

1. 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 74.5	Length of Test 3 hrs	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) pitot	Tubing Pressure (Shut-in) 165	Casing Pressure (Shut-in) 165	Choke Size 1.995"

1. 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 above is true and complete to the best of my knowledge and belief.

Thomas A. Dugan (Signature)
Petroleum Engineer
(Title)
6-21-82
(Date)

OIL CONSERVATION DIVISION

APPROVED - JUN 23 1982
Original Signed by CHARLES GHOLSON
BY _____
for SUPERVISOR DISTRICT # 3
TITLE _____

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 multiply completed wells.