All sections of this form must be filled out completely for allorable 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.

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(Title)

(Date)

Geologist

4-21-81

## 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

LAND OFFICE				
IRANSPORTER GAS				
OPERATOR				
PRORATION OFFICE				
Operator DUGAN PRODUCTION COR	Ρ.			
P O Box 208, Farming	ton, NM 87401	Other (Please explain)		
Reason(s) for filing (Check proper box)	Change to Toppoporter of	Other (Please explain)		
New Welt XX	Change in Transporter of: Oil Dry Gas			
Recompletion Change in Ownership	Casinghead Gas Condens			
If change of ownership give name				
and address of previous owner	FACE			
DESCRIPTION OF WELL AND L	Well No. Pool Name, Including For		1	
La Lee Ann	#1 WAW FR PC	State, Federal	or Fee Fed. NM 37913	
Location Unit Letter B : 990	Feet From The North Line	and 1650' Feet From T	he <u>East</u>	
	nship 27N Range	13W , NMPM, San		
		_		
DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil	ER OF OIL AND NATURAL GAS	Address (Give address to which approv	ed copy of this form is to be sent)	
Name or Authorized Transporter of Cas	inghead Gas or Dry Gas XX	Address (Give address to which approved copy of this form is to be sent)		
El Paso Natural Gas		P 0 Box 990, Farmington, NM 87401		
	Unit Sec. Twp. Age.	is gas actually connected? When		
If well produces oil or liquids, give location of tanks.	B 28 27N 13W			
If this production is commingled wit COMPLETION DATA	h that from any other lease or pool, (	give commingling order number:  New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v.	
Designate Type of Completio		XX		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
3-17-80	5-1-80	1420' GL	1374	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top CU/Gas Pay	Tubing Depth 1323 GL	
6069' GL	Pictured Cliffs	1322' GL	Depth Casing Shoe	
Perforations	Г			
1322-1332' GL, 1 SP	TUBING, CASING, AND	CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
8-3/4"	7"	83' GL	35 sx class B	
5"	2-7/8"	1413' GL	75 sx lodense + 25 sx	
	1-1/4"	1323' GL	Class	
	OR ATTOURABLE (Test must be a	feer recovery of total volume of load oil	and must be equal to or exceed top allow-	
. TEST DATA AND REQUEST F	able for this de	epth or be for full 24 hours)		
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	iji, eic.)	
		Casing Pressure	TO THE STATE OF TH	
Length of Test	Tubing Pressure		Dest VCF ool	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	APR 23 1981	
		g	APR 23 COM.	
OAC WELL		- 1	Gravity of Condensate	
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condendate	
246	3 hrs	Casing Pressure (Shut-in)	Choke Size	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)		1/2" pos. choke	
one-point back pres	<del>-</del>	174 psi	ATION COMMISSION	
. CERTIFICATE OF COMPLIAN	CE	JIE CONSERV		
to miletions of the Oil Conservation			APR 2.0 1981 19	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given the heat of my knowledge and belief.		Original Signed by FRANK T. CHAVEZ		
Commission have been compiled with and that the converge and belief, above is true and complete to the best of my knowledge and belief.			BY SUPERVISOR DISTRICT # 3	
		TITLE		
		This form is to be filed in	compliance with RULE 1104.	
ment of the second		If this is a request for allo	pwable for a newly drilled or deepends tenied by a tabulation of the deviation	
(Sign	nature) Jim L. Jacobs	Il Anne token on the Well in acc	ordance with RULE 111.	