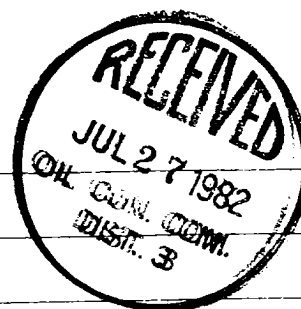


OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS1. Operator
DUGAN PRODUCTION CORP.Address
P O Box 208, Farmington, NM 87401

Reason(s) for filing (Check proper box)

New Well ☒Recompletion ☐Change in Ownership ☐

Change in Transporter of:

Oil ☐Casinghead Gas ☐Dry Gas ☐Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

2. DESCRIPTION OF WELL AND LEASE

Lease Name Farming D Com	Well No. 1R	Pool Name, Including Formation BLANCO Pictured Cliffs	Kind of Lease State, Federal or Fee	State State	Lease No. E1-1200-1
Location Unit Letter <u>K</u> : <u>1725</u> Feet From The <u>South</u> Line and <u>1850</u> Feet From The <u>West</u>					
Line of Section <u>2</u> Township <u>27N</u> Range <u>9W</u> , NMPM, <u>San Juan</u> County					

3. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)	
El 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? <u>No</u> When	

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

4. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Some Rest'y.	Diff. Rest'y.
		XX	XX					
Date Spudded 5-20-82	Date Compl. Ready to Prod. 7-12-82	Total Depth 2419'	P.B.T.D. 2390'					
Elevations (D), RT, GR, etc.) 2475' GL; RKB = GL	Name of Producing Formation Pictured Cliffs	Top Oil/Gas Pay 2274	Tubing Depth 2323' GL					
Perforations 2274-2335, 26 holes			Depth Casing Shoe 2419' GL					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
8-3/4"	7"	132' GL	35 sx (41 cu.ft.)					
5-1/8"	2-7/8"	2419' GL	150 sx (246 cu.ft.)					
	1 1/2"	2318' GL						

5. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of lead 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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
974	3-1/3 hrs	---	
Testing Method (prior, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
back pressure	310 psi	310 psi	5/8"

6. 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

July 26, 1982

OIL CONSERVATION DIVISION

JUL 27 1982

APPROVED

BY

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 deepens well, this form must be accompanied by a tabulation of the deviated 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 must be filled for each pool in multiple completed wells.