5 ×NMOCO

Schmit 5 Courses
Apparonnate District Office
DISTRICT!
P.O. Box 1980, Hobbs, NM 88240

P.O. Drawer DD, Artesia, NM 88210

Energy, Minerals and Natural Resources Department

1 File

Form C-101 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

State of New Mexico

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	REQUEST	FOR ALLOWA	BLE AND A	UTHORI	ZATION				
I .		ANSPORT OF			AS				
DUGAN PRODUCTION CORP.						Weil API No. 30-045-26337			
Accress									
P.O. Box 420, Farmin	ngton, NM	37499	() () () () ()	(P' I	-/-1				
Reason(s) for Filing (Check proper box)	Change	in Transporter of:	_	(Piease expir					
New Well		Dry Gas	Ett	ective	5-1-90				
Change in Operator	Casinghead Gas	Condensate							
If change of operator give name									
and address of previous operator	4 N D 4 D 4 C D								
II. DESCRIPTION OF WELL		ing Formation				V Lease No.			
La Lee Ann	5	Gall	egos Gallu	ıp Ext.	State(Federal or Fee	NM 37	913	
Location I Unit Letter	1850	Feet From The	South Line:	790	Fe	et From The	East	Line	
Section 28 Townshir	27N	Range 13W	, NM	PM, San	Juan			County	
	CDODTED OF	OII AND MATT	DAI CAS						
III. DESIGNATION OF TRANS	Address (Give	Address (Give address to which approved copy of this form is to be sent)							
Meridian Oil Inc.		P.O. Box 4289, Farmington, NM 87499 Address (Give address to which approved copy of this form is to be sent)							
Name of Authorized Transponer of Casing El Paso Natural Gas C	head Gas (XXI) So. (no chang	e) or Dry Gas	Address (Give	address to wi	nich approved	copy of this for	m is to be se	ns)	
If well produces oil or liquids, jve location of tanks.	Unit Sec.		Is gas actually Yes	connected?	When 7-	? 18-85			
If this production is commingled with that f			ling order numbe	r					
V. COMPLETION DATA	lou we	II Gas Weil	New Well	Workover	Deepen	Plug Back S	ame Res'v	Diff Res'v	
Designate Type of Completion -			1					Ĺ	
Date Spudded	Date Compl. Ready	to Prod.	Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation			Top Oil/Gas Pa	Top Oil/Gas Pay			Tubing Depth		
Perforations				Depth Casing Shoe					
	TUDDA	CASING AND	CEMENTING	G PECOP	D				
TUBING, CASING AND HOLE SIZE CASING & TUBING SIZE				EPTH SET	<u>. </u>	SACKS CEMENT			
PIOCE DIEE									
						1			
. TEST DATA AND REQUES	T FOR ALLOW	ABLE							
	ecovery of total volum	e of load oil and must	be equal to or en	ceed top allo	wable for this	s depth or be for	full 24 hour	(s.)	
Date First New Oil Run To Tank	Date of Test		Producing Med	ю (гюж, ра	ν,φ. gus 191, 1	,			
Length of Test	Tubing Pressure	Casing Pressure			JONE E E I V E				
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.			APR27 1990				
GAS WELL	<u> </u>	····	<u>:</u>		***	OIL CO	ON. D	IV.,	
Actual Prod. Test - MCF/D Length of Test			Bbls. Conden □	LE/MMCF	يم کا ، دري نا	Gravity of OIST:13			
Testing Method (pitot, back pr.)	Tubing Pressure (Sh	Casing Pressure	Casing Pressure (Shut-in)				-		
/L OPERATOR CERTIFICA			0	IL CON	ISERV	ATION D	IVISIO	N	
I hereby certify that the rules and regular Division have been complied with and the				APR 27 1990					
is true and complete to the best of my ki	nowledge and belief.		Date	Approve					
But Co	-3-CZ		By		3.	w d	<u>معمور شي په ساخت.</u>		
			·						
Printed Name 4-26-90	oduction Sup	erintendent Tule	Title_		SUPE	RVISOR DIS	STRICT	∦3 	

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filled for each pool in multiply completed wells

NEEE! VE

VSG FARTN

OIL CON. DIV.

والمعاقبة المنبو