HO. OF CEPIES REC	5		
DISTRIBUTIO			
SANTA FE	1		
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
HANSFORTER	GAS		
OPERATOR	[/_		
PRORATION OF			

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104 Supersedes Old C-104 and C-110

	TAFE	-	4-	\exists		REQUI			OWABLE		Effective 1-1	-65 ,		
FIL		$ +$ $^{\prime}$	+	\dashv	ALITE	HORIZATION TO	•	AND SPORT	ו מאא ווי	NATURAL GA	Δ S			
	.G.S. ND OFFICE			-	AUT	TURIZATION TO	IKAN	JI OK I	OIL AND	INTOKAL O				
 	OIL		7	\exists										
TRA	ANSPORTER GAS	5 /	/											
OPI	ERATOR													
PR	ORATION OFFICE										API 20-0/5	22762		
Oper		Dugan Production Corp.												
Addr	tress													
7001	Box 234, Farmington, NM 87401													
Reas	leason(s) for filing (Check proper box)								Other (Pleas	e explain)				
	New We!1 X Change in Transporter of:													
1	ompletion				OII	=	Ory Gas Condensa	HI						
Char	nge in Ownership				Casing	head Gas	Condenso	e []						
If ch	ange of ownership g	give n	ame											
and a	address of previous	owne	:r											
. DES	CRIPTION OF WI	ELL	ANI	<u>D</u> 1	LEASE Well N	lo Pool Name, Includ	ting For	nation		Kind of Lease		Lease No.		
Lea	se Name				well N	Basin Dak				State, Federal	or Fee Fed	10561		
ļ	Big Field					Das III Dak	O ca							
	ļ	Р	79	90	Feet I	From The South	Line	and 4	790	Feet From T	he <u>East</u>			
'	Jnit Letter	: -				10/11 1/110						<u>.</u>		
.	ine of Section 10	0		ov	vnship	3()N Rang	e	14W	, NMPI	u, San	Juan	County		
L.—														
. DES	SIGNATION OF T	RAN	SPO	R1	TER OF O	IL AND NATURA r Condensate X	L GAS	Address (Give address	to which approv	ed copy of this form i	s to be sent)		
Nau	Thriftway Co													
Ngn	Come of Authorized Transporter of Cabinghaman and Cabinghaman											s to be sent)		
	Northwest Pipeline Corp. Box 90, Farmington, NM 87401 Sec. Two. Edge. Is gas actually connected? When													
If w	vell produces oil or lic					Sec. Twp. Po	ge.		tually connec	rted / White	•••			
give	e location of tanks.			···-	<u> </u>			No						
If th	is production is con	nming	gled v	wi	th that from	any other lease or	pool, gi	ive comn	ningling ord	er number.				
	MPLETION DATA			_	(2/)	Oil Well Gas V	Well	New Well	Workover	Deepen	Plug Back Same I	Res'v. Diff. Res'v.		
]]	Designate Type of	f Cor	mple	tic		<u> </u>					P.B.T.D.			
Dat	e Spudded					l. Ready to Prod.	-	Total De			6605			
	3-14-79				<u> </u>	5-10-79		Top Oil/	6680'		Tubing Depth			
Ele	vations (DF, RKB, RT	r, GR	, etc.	j		noducing Formation		Top Ony	6440'		6434' RKB			
	6143' GR			Basin Dakota			0440			Depth Casing Shoe				
Per	6440-6449													
-						TUBING, CASING		CEMEN.	TING RECO	RD	SACKS C	EMENT		
	HOLE SIZ	E			CAS	ING & TUBING SIZ	E		DEPTH :	RKB	125 s			
	12-1/4"				 	8-5/8" 4-1/2"			6677'			x 1st stage		
	7-7/8"				 	_ 4-1/2					600 s	x 2nd stage		
					<u> </u>	2-3/8"			6434 '	RKB	<u>i</u>			
 7 TE	ST DATA AND R	EQU	EST	F	OR ALLO	WABLE (Test mu	st be aft	er recove	ry of total vo or full 24 hou	lume of load oil	and must be equal to	or exceed top allow-		
លារ	r. WELL			_	Date of Te		inia dep	Producin	g Method (Fl	ow, pump, gas li	ft, etc.)			
Da	te First New Oil Run	To To	ink#		Date of 1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		• • • • • • • • • • • • • • • • • • • •	•					
	ngth of Test			_	Tubing Pr	o#####		Casing F	,tessme		Choke Standard	No.		
Le	ngth of lest						Į				Ga - MCF			
Ac	tual Prod. During Tes	t		_	Oil-Bble.			Water - B	bls.		Gdy - MC			
-											JUN	7 1979 		
												COM.		
GA	S WELL tual Prod. Test-MCF	(A)			Length of	Test		Bbls. Co	ondensate/MM	1CF	Gravity of Condens	r.'•3		
^	149 AOF	. –			6 hrs	stabilized 1	flow				Choke Siz			
Te	esting Method (pitot, b	ack p	r.)		Tubing Pr	ensure (Shut-in)		Casing I	ressure (Sh	ut-in)				
	·				1	706 SI					1/2" ATION COMMISS	ION		
ـــــــ I. CE	RTIFICATE OF	COM	PLI/	AN	ICE				_					
								APPR	OVED		11 1963	, 19		
I hereby certify that the rules and regulations: Commission have been compiled with and the								Original Signed From D. Hendvick						
Con	Commission have been complied with and that the should be above is true and complete to the best of my knowledge and belief.							i		9 / Line 100 h	pilhali #3			
								TITLE						
\cap I							This form is to be filed in compliance with RULE 1104.							
	The Millar							II						
(Signature)							well, this form must be accompanied by a tabulation of the well in accordance with RULE 111.							
	President (Title) 6-6-79 (Date)							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						
				(1	/UIT/			s	eparate Fo	rms C-104 mu	at be filed for eac	u boot tu mmribi		
							ļ	ii compi	leted wells.					