STATE OF NEW M ENERGY MO MINERALS D				
40. 00 100HE MILINGS	~ i `` `			
DISTRIBUTION	 			
SANTA FE				
P1LE	 			
V.8.0.4.				
LANG OFFICE	\vdash			
TRAMSPORTER OIL				
OPERATOR				
PROMATION OFFICE				
1.				
Operator				
Dugan Production	Corp.			
Addréss				
P.O. Box 208 Fa	rminaton			
P.O. Box 208 Fa	proper box)			
New Well				
Recompletion				
Change in Ownership				
	If change of ownership give name			
and address of previous of	wner			
II. DESCRIPTION OF V	WELL AND			
Lease Name				
Mc Nona				
Ms. Nona				
Unit Letter A	_ 920			
1 -				
Line of Section 15	Towns			

OIL CONSERVATION DIVISION P. Q. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND

for an area	Form C-104 Revised 10-01-78 Format 08-01-83 Page 1
	E TYER
OIL CON	

1.	AUTHOR	PIZATION TO TRANS	PORT OIL AND	NATURAL GAS	DIST DIV	<u>*</u>
Operator					3 .	
Dugan Production Corp.						
Address						
P.O. Box 208 Farmington Resson(s) for filing (Check proper box)	n. NM 87	499				
			Other	(Please explain)		
New Well	Cµao qe 1	n Transporter of:				
Recompletion		=	ry Gas			
Change in Ownership	Casi	nghead Gas X C	ondensale Ef	fective Decem	ber 11,1987	
If change of ownership give name					•	
and address of previous owner	 -	·				
II. DESCRIPTION OF WELL AND		Pool Name, Including F		Kind of Leas		7
	ł	Basin Dakota	ormation	_	Federal	NM 28820
Ms. Nona	2	Dasili Dakuta		i state, reaest		
		Novth	970		Fast	
Unit Letter A 920	Feet Fro	m The North	• and	Feet From	The	
Line of Section 15 Town	30N	Range -	L4W	NMPM,	San Juan	County
Cina or Section 10	ieligo con	nunge		itmr m,	····	
III. DESIGNATION OF TRANSPO	ORTER OF	OIT AND NATIRAL	GAS			
Name of Authorized Transporter of Off	or C	ondensate 🐧	Andress (Give a	ddress to which appro	ived copy of this form is i	o be sentj
Conoco, Inc.			P.O. Box	1429, Bloomf	ield, NM 87413	i
Name of Authorized Transporter of Casu	nghead Gas	or Dry Gas 🕎			oved copy of this form is	
El Paso Natural Gas Co.	(1	lo Change)				
If well produces oil or liquids, que location el tanks.	Unit Sec	5 30N 14W	le gae octuelly (connected? W?	9-18-78	
f this production is commingled with	that from an	v other lease or sool	eive comminglis	e order number		
•		•	fire community			
NOTE: Complete Parts IV and V	on reverse s	ide if necessary.				

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

Silma Farley	
Production Report Supervisor	_
 (Tule)	_
1) 9-81	

(Detel

\sim	CON	ATIONI	DIVISION

APPROV	DEC 09 1987	
_	Just Share	
TITLE_	SUPERVISION DISTRICT # 3	

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or despened 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.