4 NMOCD

Submit 5 Copies
Appropriate District Office
DISTRICT |
P.O. Box 1980, Hobbs, NM \$8240

1 File

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

Well API No.

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

Operator

DISTRICT II P.O. Drawer DD, Anesia, NM \$8210

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

DUGAN PRODUCTION	ON CORP.					
ddress P.O. Box 420, Farm	nington, NM 8	17499				
eason(s) for Filing (Check proper beat) iew Well ecompletion hange in Operator change of operator give name		in Transporter of: Dry Gas Condennate	Pool Redes Per NMOCD (Effective	ignation Order No		
d address of previous operator						
DESCRIPTION OF WELL	AND LEASE					
ease Name Bi-Knobs	Well No.				of Lease	Lease No. -3045-1
DI - KIIODS		T IWITE PIOUR	ds Fruitland San	u Py	, azza di re	
Unit Letter H	:1850	_ Feet From The _	North Line and		East	Line
Section 32 Townsh	nip 30N	Range 14W	, NMPM,		San Juan	County
. DESIGNATION OF TRAI	NSPORTER OF O	IL AND NATI	IRAL GAS			
me of Authorized Transporter of Oil	or Conde		Address (Give address to wi	hich approved	copy of this form is to be	: sent)
me of Authorized Transporter of Casinghead Gas or Dry Gas XX			Address (Give address to which approved copy of this form is to be sent)			
	an Production Corporation produces oil or liquids. Unit Sec. Tem. Re		P.O. Box 420 , Farmington, NM 87499			
: location of tanks.	Unit Sec.	Twp. Rge. 	is gas actually connected?	When	?	
is production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA						
	Oil Well	Gas Weil	New Well Workover	Deepea	Plug Back Same Res	Diff Resiv
Designate Type of Completion E Spudded	Date Compl. Ready to	Prod	Total Depth			
	, -	· i i cu			P.B.T.D.	
vations (DF, RKB, RT, GR, etc.)	F, RKB, RT, GR, etc.) Name of Producing Formation			Top Oil/Gas Pay		
orations	1				Depth Casing Shoe	
	TURING	CASING AND	CEMENTING RECORL			
HOLE SIZE	CASING & TU		DEPTH SET		SACKS CEMENT	
			3 5	es i	W E M	
			13) E	(j lb l	• 	
WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top all Stable for his depth or be for full 24 hours.)						
First New Oil Run To Tank	Date of Test	iona ou ana musi i	Producing Method (Flow, pump, easily No.)			
					_	
th of Test	Tubing Pressure		Casing Pressure	DI21.	Soke Size	
al Prod. During Test	Oil - Bbls.		Water - Bbis.		Gas- MCF	
S WELL						
al Prod. Test - MCF/D	Length of Test		Bbis. Condensate/MMCF		Gravity of Condensate	
g Method (puot, back pr.)	Tubing Pressure (Shut-m)		Casing Pressure (Shut-in)		Choke Size	
OPERATOR CERTIFICA		1	OIL CONS	CEDVA:	TION DIVICIO	
vision have been complied with and that the information given above			OIL CONSERVATION DIVISION			
true, and complete to the best of my to	Date ApprovedSEP 2 7 1990					
Sol & Just			$\neg \cdots \rightarrow \neg$			
in L. Jacobs	By Supering					
oted Name Title			SUPERVISOR DISTRICT #3			
eptember 24, 1990 325-1821 Telephone No.			7.100			
		!!				

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 management or other such changes