District I PO Box 1980, Hobbs, NM 88241-1980

State of New Mexico Energy, Minerals & Natural Resources Department

Form C-104 Revised October 18, 1994 Instructions on back Submit to Appropriate District Office 5 Copies

District II 811 South First, Artesia, NM 88210 District III

1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION 2040 South Pacheco Santa Fe, NM 87505

District IV 2040 South Pa I				LLOWAR	, , , , , , , , , , , , , , , , , , ,							ENDED REPOR	
I. REQUEST FOR ALLOWABLE AND AUTHORIZATI Operator name and Address Dugan Production Corp. P. O. Box 420 Farmington, NM 87499-0420 (505)325-1821										ON TO TRANSPORT 'OGRID Number 006515			
									Reason for Filing Code				
4.		⁵ Pool Nam	e		NW 4 Pool Code			Pool Code					
30 - 045 -	30730 roperty Code		Basin Fruitland Coal						71629				
028964			Property Name Turk's Toast Com							' Well Number 92			
II. 10 . Ul or let no.	Surface Section	Location Township											
N	18	30N	14W	Lot.ldn	Feet from	n the North/South Lin 805' South			Feet from the 2195'	East/West line West		County San Juan	
UL or lot no.	11 Bottom Hole Lo				Feet fro	om the North/South		outh line	Feet from the In				
12 Lse Code		3UN		Connection Date	Feet Irg		North/South line South		Feet from the		est line ESt	San Juan	
	L			Connection Date		C-129 Permi	it Number		C-129 Effective	Date	" C-1	129 Expiration Date	
18 Teanspo	II. Oil and Gas Transpo			19 Transporter Name and Address			²⁰ POD 21 O/G		²² POD ULSTR Location				
151618	8	El F	aso Field S		rvices		2813279		Dugan'	and Description Dugan's Turk's Toast CDP meter			
	61	4 Reilly Ave., Farmington, NM 87401			101				located at: H-6-29N-14W				
ANU 2324 37									Dir mark				
									NOV 2001 PRECONDIVERSION SE				
W. D.		PE OL COLLEGE S											
V. Pro 2830	duced POD 625	water			24 P(OD ULST	'R Locat	ion and	Description		1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	N. C.	
V. Wel	l Comp	oletion	Data			·							
²⁵ Spud Date 10/22/01		²⁶ R	Ready Date 2		²⁷ TD 1190'		28 PBTD 1124'		29 Perforations 888'-1040'		³⁶ DHC, DC,MC		
31	Hole Size 8-3/4"	· · · · · · · · · · · · · · · · · · ·	32 Casing & Tubing Size			33 Depth Set			t 3		4 Sacks Cement		
6-1/4"			4½"			120' 1184'			50 sa				
				1072'					130 s	acks			
	ll Test				· J								
N/A	35 Date New Oil N/A		³⁴ Gas Delivery Date N/A		Date /01	³⁸ Test Leng 24 hrs		~ I	³⁹ Tbg. Pressur 5		40	Csg. Pressure	
41 Choke 3/41	- (Oil D	⁴³ Wa 50			44 Gas 100		⁴⁵ AOF N/A		*	Test Method F	
I hereby ce nave been con rue and com Signature:	mplied with plete to the	h and that the best of my	he informati knowledge	servation Division given above and belief.	sion e is	(Approve			ERVAT			ISION	
Printed name: Terry Kochis							Approved by:						
litle: Engineer		Approval Date: DEC -3 2001											
Date: Novembe	т 15, 2001		Phone: (505	5)325-1821	ULC U					1			
If this is a cha	ange of opera	tor fill in the	OGRID numb	er and name of t	the previo	ous operator							
	Previous Op	erator Signat	ure			Printed	Name			Title	e	Date	
												H	

New Mexico Oil Conservation Division C-104 Instructions

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABLED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT

Report all gas volumes at 15,025 PSIA at 60°. Report all oil volumes to the nearest whole barret.

A request for allowable for a newly drilled or deepened well must be accompanied by a tabulation of the deviation tests conducted in accordance with Rule 111.

All sections of this form must be filled out for allowable requests on new and recompleted wells.

Fill out only sections I, II, III, IV, and the operator certifications for changes of operator, property name, well number, transporter, or other such changes.

A separate C-104 must be filed for each pool in a multiple completion.

 $\mbox{Improperly filled}$ out or incomplete forms may be returned to operators unapproved.

- 1. Operator's name and address
- Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office. 2.
- 3.

Reason for filing code from the following table:

NW New Well

RC Recompletion

CH Change of Operator (Include the effective date.)

AO Add oil/condensate transporter

CO Change oil/condensate transporter

AG Add gas transporter

CG Change gas transporter

RT Request for test allowable (Include volume requested)

If for any other reason write that reason in this box.

- 4. The API number of this well
- 5. The name of the pool for this completion
- 6. The pool code for this pool
- 7. The property code for this completion
- 8. The property name (well name) for this completion
- 9. The well number for this completion
- The surface location of this completion NOTE: If the United States government survey designates a Lot Number for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD unit letter. 10.
- 11. The bottom hole location of this completion
- 12. Lease code from the following table:
 - Federal State

 - NU
 - State Fee Jicarilla Navajo Ute Mountain Ute Other Indian Tribe
- The producing method code from the following table:
 F Flowing
 P Pumping or other artificial lift 13.
- MO/DA/YR that this completion was first connected to a gas transporter
- The permit number from the District approved C-129 for this completion 15.
- MO/DA/YR of the C-129 approval for this completion 16.
- 17. MO/DA/YR of the expiration of C-129 approval for this
- 18. The gas or oil transporter's OGRID number
- 19. Name and address of the transporter of the product
- The number assigned to the POD from which this product will be transported by this transporter. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here. 20.
- Product code from the following table:
 O Oil
 G Gas 21.
- The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A", "Jones CPD",etc.) 22.
- The POD number of the storage from which water is moved from this property. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here. 23.
- The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A Water Tank", "Jones CPD Water 24. (Example: 'Tank",etc.)
- 25. MO/DA/YR drilling commenced
- 26. MO/DA/YR this completion was ready to produce
- 27. Total vertical depth of the well
- 28. Plugback vertical depth
- Top and bottom perforation in this completion or casing shoe and TD if openhole 29.
- Write in 'DHC' if this completion is downhole commingled with another completion, 'DC' if this completion is one of two non-commingled completions in this well bore, or 'MC' 30

- if there are more than three non-commingled completions in this well bore.
- 31. Inside diameter of the well bore
- 32. Outside diameter of the casing and tubing
- 33. Depth of casing and tubing. If a casing liner show top and bottom.
- 34. Number of sacks of cement used per casing string

If the following test data is for an oil well it must be from a test conducted only after the total volume of load oil is recovered.

- MO/DA/YR that new oil was first produced 35,
- 36. MO/DA/YR that gas was first produced into a pipeline
- 37. MO/DA/YR that the following test was completed
- 38. Length in hours of the test
- Flowing tubing pressure oil wells Shut-in tubing pressure gas wells 39.
- Flowing casing pressure oil wells Shut-in casing pressure gas wells 40.
- 41. Diameter of the choke used in the test
- 42. Barrels of oil produced during the test
- Barrels of water produced during the test 43.
- 44 MCF of gas produced during the test
- 45. Gas well calculated absolute open flow in MCF/D
- 46. The method used to test the well: P Pumping
 S Swabbing
 If other method please write it in.
- 47. The signature, printed name, and title of the person authorized to make this report, the date this report was signed, and the telephone number to call for questions about this report
- The previous operator's name, the signature, printed name, and title of the previous operator's representative authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that 48.