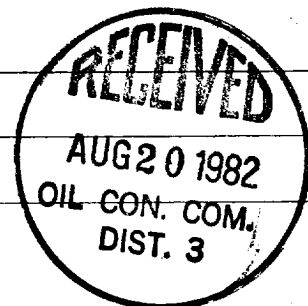


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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65



1.

Operator  
DUGAN PRODUCTION CORP.

Address  
P O Box 208, Farmington, NM 87401

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name  
and address of previous owner

## II. DESCRIPTION OF WELL AND LEASE

Lease Name Hogan	Well No. #5	Pool Name, including Formation Horseshoe Gallup	Kind of Lease State, Federal or Fee	Navajo 14-20-603-586	Lease No.
Location Unit Letter <u>F</u> : 1980 Feet From The <u>North</u> Line and 1980 Feet From The <u>West</u> Line of Section <u>32</u> Township <u>32N</u> Range <u>17W</u> , NMPM, <u>San Juan</u> County					

## III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Permian Corp.	Address (Give address to which approved copy of this form is to be sent) Box 1702, Farmington, NM 87401					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 32	Twp. 32N	Pge. 17W	Is gas actually connected? No	When

If this production is commingled with that from any other lease or pool, give commingling order number:

## IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well XX	Gas Well	New Well XX	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 6-19-82	Date Compl. Ready to Prod. 8-4-82	Total Depth 1140'	P.B.T.D. 1115'					
Elevations (DF, RKB, RT, GR, etc.) 5434' GL	Name of Producing Formation Gallup	Top Oil/Gas Pay 1064'	Tubing Depth 1053'					
Perforations 1064-74, 1 SPF	Depth Casing Shoe 1134' GL							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
8-3/4"	7"	99' GL	17 cu.ft.					
6-1/4"	4 1/2"	1134' GL	70 cu.ft.					
	2-3/8"	1053' GL						

## V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 8-16-82	Date of Test 8-16-82	Producing Method (Flow, pump, gas lift, etc.) pumping	
Length of Test 24 hrs	Tubing Pressure Zero	Casing Pressure 15 psi flowing	Choke Size
Actual Prod. During Test	Oil-Bbls. 6 BOPD	Water-Bbls. ---	Gas-MCF 20 MCF

## GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

## VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Thomas A. Dugan (Signature)  
Petroleum Engineer

8-19-82

(Date)

OIL CONSERVATION COMMISSION  
10-1-82  
APPROVED OCT 1 1982

BY Original Signed by CHARLES GHOLSON

TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3

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

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