

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT - " for such proposals

5. Lease Designation and Serial No.
NM 19163

6. If Indian, Allotted or Tribe Name

SUBMIT IN TRIPLICATE

1. Type of Well

Oil Well Gas Well Other

7. If Unit or CA, Agreement Designation

2. Name of Operator

Dugan Production Corp.

8. Well Name and No.

Turk's Toast 90-S-M

3. Address and Telephone No.

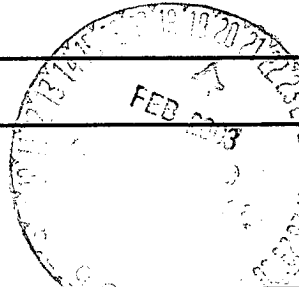
P.O. Box 420 , Farmington, NM 87499 (505) 325 - 1821

9. API Well No.

30 045 30771

Location of Well (Footage, Sec., T., R., M., or Survey Description)

**1335' FnL & 935' FWL (SW/4 NW/4)
Unit E, Sec. 17, T30N, R14W, NMPM**



10. Field and Pool, or Exploratory Area

TWIN MOUNDS FR SAND PC

11. County or Parish, State

San Juan, NM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

TYPE OF ACTION

Notice of Intent

Abandonment

Change of Plans

Subsequent Report

Recompletion

New Construction

Final Abandonment Notice

Plugging Back

Non-Routine Fracturing

Casing Repair

Water Shut-Off

Altering Casing

Conversion to Injection

Other

Change to Original APD

Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Amend APD to:

- 1) Change well name from Turk's Toast No. 90-S-M to Turk's Toast No. 90S and
 - 2) Change pool name from Twin Mounds Fruitland Sand PC to Harper Hill Fruitland Sand-Pictured Cliffs
- Revised NMOCD Form C-102 is attached.

14. I hereby certify that the foregoing is true and correct

Signed John D. Roe Title Engineering Manager

Date 2/13/2003

(This space for Federal or State office use)

Approved by _____ Title _____

Date

FEB 18 2003

Conditions of approval, if any:

FARMINGTON FIELD OFFICE

Stp

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

NMOCD

*See Instruction on Reverse Side

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

District II
PO Cramer CD, Artesia, NM 88211-0719

District III
1000 Rio Brazos Rd., Aztec, NM 87410

District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-102
Revised February 21, 1994
Instructions on back
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number 30-045-30771		*Pool Code 71629 / 78160		*Pool Name Basin Fruitland Coal / Harper Hill FR Sand PC	
*Property Code		*Property Name TURKS TOAST			*Well Number 90S
*CGRID No. 006515		*Operator Name DUGAN PRODUCTION CORPORATION			*Elevation 5537'

¹⁰ Surface Location

U. of Lot No.	Section	Township	Range	Lot Ion	Feet from the	North/South Line	Feet from the	East/West Line	County
E	17	30N	14W		1335	NORTH	935	WEST	SAN JUAN

¹¹ Bottom Hole Location If Different From Surface

U. of Lot No.	Section	Township	Range	Lot Ion	Feet from the	North/South Line	Feet from the	East/West Line	County

*Dedicated Acres 320-Acres (W/2), 160-Acres (NW/4)	*Joint or Infill	*Consolidation Code	*Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

¹⁷ OPERATOR CERTIFICATION
I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

John D. Roe, Jr.

Signature
John D. Roe, Jr.

Printed Name
Engineering Manager

Title
02/13/03

Date

¹⁸ SURVEYOR CERTIFICATION
I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

Date of Survey: JUNE 14, 2002

Signature and Seal of Professional Surveyor

JASON C. EDWARDS
Certificate Number 15269