

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
NOG-0502-1714

6 If Indian, Allotted or Tribe Name

SUBMIT IN TRIPLICATE

RECEIVED

DEC 11 2007

1 Type of Well

Oil Well Gas Well Other

7 If Unit or CA, Agreement Designation

2 Name of Operator

Dugan Production Corp.

Bureau of Land Management
Farmington Field Office

8 Well Name and No

Werito #1

3 Address and Telephone No.

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

9 API Well No.

30 045 33382

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

**1975' FSL & 1905' FEL (NW/4SE/4)
Unit J, Sec. 8, T23N, R9W**

10. Field and Pool, or Exploratory Area

Bisti Gallup, South (5860)

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

- | | | |
|---|--|--|
| <input type="checkbox"/> Notice of Intent | <input type="checkbox"/> Abandonment | <input type="checkbox"/> Change of Plans |
| <input checked="" type="checkbox"/> Subsequent Report | <input type="checkbox"/> Recompletion | <input type="checkbox"/> New Construction |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Plugging Back | <input type="checkbox"/> Non-Routine Fracturing |
| | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> Water Shut-Off |
| | <input type="checkbox"/> Altering Casing | <input type="checkbox"/> Conversion to Injection |
| | <input checked="" type="checkbox"/> Other <u>Production test</u> | <input type="checkbox"/> 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)*

Reporting production test information:

26 MCFD. 6 BWPD. 8 BOPD.

RCVD DEC 14 '07

**OIL CONS. DIV.
DIST. 3**

14 I hereby certify that the foregoing is true and correct

Signed John Alexander Title Vice-President Date 12/7/2007

This space for Federal or State office use)

Approved by _____ Title _____ Date _____

Conditions of approval, if any

ACCEPTED FOR RECORDS

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

*See Instruction on Reverse Side

NMOCD

FARMINGTON FIELD OFFICE