

(November 1983)
(Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

(Other instructions on reverse side)

Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-5452
2. NAME OF OPERATOR DUGAN PRODUCTION CORP.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 420, Farmington, NM 87499		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1590' FNL & 1180' FEL		8. FARM OR LEASE NAME Federal 19-22-6
14. PERMIT NO.		9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.)		10. FIELD AND POOL, OR WILDCAT Rusty Chacra
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 19, T22N, R6W, NMPM
		12. COUNTY OR PARISH Sandoval
		13. STATE NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PCLL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input checked="" type="checkbox"/> Change of Operator-Status	

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

17. 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.)*

In response to BLM letter NM-5452 (WC) 3162.3-2 (019) dated 4-27-90 (addressed to Integrated Energy Incorporated), please be advised that Dugan Production has become the new operator of this well effective 5-1 -90 (change of ownership effective 1-1-90).

Since our office has just received this letter, as well as just taken over responsibilities of operator, we request more time to evaluate the well. After evaluation, we will notify the BLM in an expeditious manner of our intent for this well.

RECEIVED

JUL 13 1990

THIS APPROVAL

OIL CON.

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

SIGNED Jim L. Jacobs
(This space for Federal or State office use)

TITLE Geologist

DATE 5-31-90

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

NMOOD

*See Instructions on Reverse Side

DIST
APPROVED
DATE <u>5-31-90</u>
<u>Jim L. Jacobs</u>
FARMINGTON FIELD OFFICE