

Form 3160-5  
(November 1983)  
(Formerly 9-331)

5 BLM 1 Celsius-Fmn 1 Celsius-SLC 1 File  
**UNITED STATES**  
**DEPARTMENT OF THE INTERIOR**  
**BUREAU OF LAND MANAGEMENT**

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.  
NM 16762

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Witty

9. WELL NO.  
3

10. FIELD AND POOL, OR WILDCAT  
\*South Bisti-Gallup

11. SEC., T., R., E., OR BLK. AND  
SURVEY OR AREA  
Sec.12, T23N, R10W, NMPM

12. COUNTY OR PARISH 13. STATE  
San Juan NM

**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.)

RECEIVED

JAN 10 1986

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR  
DUGAN PRODUCTION CORP.

3. ADDRESS OF OPERATOR  
P O Box 208, Farmington, NM 87499 BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

1980' FNL - 660' FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6755' GL; 6767' RKB

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

Change of Acreage Dedication

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

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

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.)\*

Attached is NMOCD form C-102, reflecting a change of acreage dedication for the subject well resulting from the establishment of special pool rules for the South Bisti-Gallup Oil Pool (NMOCD Order No. R-8090, dated December 4, 1985).

\*Denotes change from Undesignated Gallup Oil Pool

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

SIGNED

Jim L. Jacobs

TITLE Geologist

DATE

1-9-86

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

JAN 14 1986

\*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA

NMOCD

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.

All distances must be from the outer boundaries of the Section.

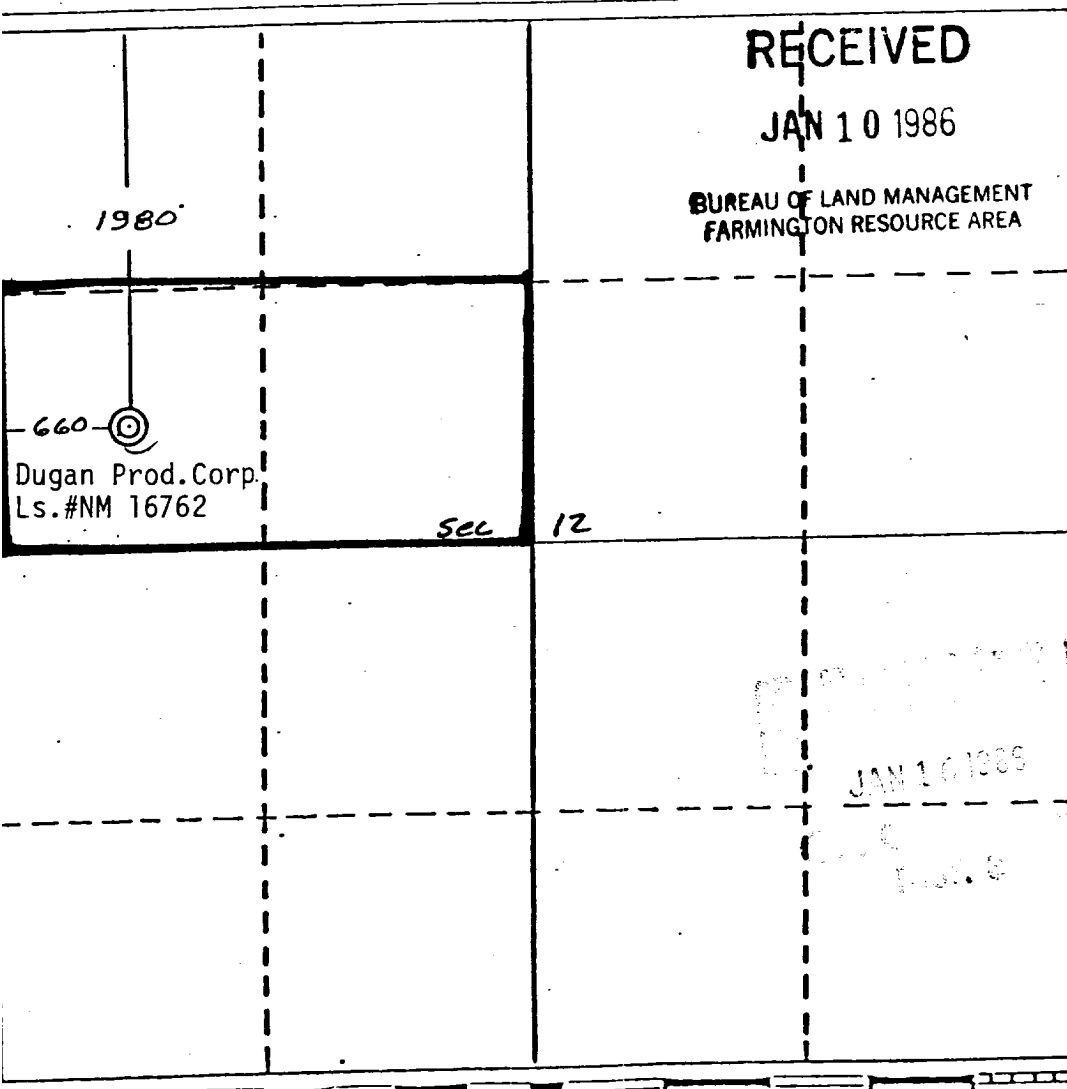
Lessee <b>Dugan Production Corporation</b>		Lease <b>Witty</b>		Well No. <b>3</b>	
Well Letter <b>E</b>	Section <b>12</b>	Township <b>23 North</b>	Range <b>10 West</b>	County <b>San Juan</b>	
Actual Footage Location of Well:					
1980 feet from the		North line and		660 feet from the West line	
Ground Level Elev. <b>6755</b>	Producing Formation <b>Gallup</b>		Pool <b>South Bisti-Gallup</b>		Dedicated Acreage: <b>80</b> Acres

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation \_\_\_\_\_

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) \_\_\_\_\_

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Division.



CERTIFICATION	
I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.	
Name	<b>Jim L. Jacobs</b>
Position	<b>Geologist</b>
Company	<b>Dugan Production Corp.</b>
Date	<b>1-9-86</b>
I hereby certify that the well location shown on this plat was obtained from field notes of a 5979 survey made by me or under my supervision, and that the same is true and correct to the best of my knowledge.	
Date Surveyed	<b>June 30, 1984</b>
Registered Professional Engineer and/or Land Surveyor	
<b>Edgar L. Risenhoover</b>	
Certificate No.	<b>5979</b>
<b>Edgar L. Risenhoover, L.S.</b>	