

BUREAU OF LAND MANAGEMENT

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR DUGAN PRODUCTION CORP.		8. FARM OR LEASE NAME Champ
3. ADDRESS OF OPERATOR P.O. Box 420, Farmington, NM 87499		9. WELL NO. 7
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FSL & 1830' FWL K		10. FIELD AND POOL, OR WILDCAT South Bisti Gallup
14. PERMIT NO. 30-045-28241		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 5, T23N, R10W, NMPM
15. ELEVATIONS (Show whether DF, BT, GR, etc.) 6558' GL		12. COUNTY OR PARISH San Juan
		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"/>	PULL 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) Spud, casing & cement	XX

(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.)*

Moved in & rigged up Four Corners Drilling Company Rig #14. Spudded at 10:00 A.M. 4-23-91. Drilled to 220' RKB. Ran 5 jts. 8-5/8" OD, 24#, 8 Rd, ST&C casing (T.E. 200.13') set at 212.13' RKB. Cemented with 150 sx class "B" plus 1/4# celloflake/sk (total cement slurry = 177 cu.ft.). Circulated 4 bbls cement to surface. P.O.B. at 2:30 P.M. 4-23-91. Waited on cement and nipped up BOP 8-1/2 hrs. Pressure tested BOP and surface casing 1000 psi for 30 minutes - held OK.

RECEIVED
JUN 3 1991
OIL CON. DIV.
DIST. 3

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 4-24-91

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

*See Instructions on Reverse Side