	5 BLM 1 Fil	Δ				
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•	t INITT	ED STATES	FORM APPROVED			
Form 3160-5 UNIT		ED SIMICO	Budget Bureau No. 1004-0135 Expires: March 31, 1993			
(June 1990)	DEPARIMEN	DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT				
•	BUREAU OF L	5. Lease Designation and Serial No.				
		AND REPORTS ON WELLS	6. If Indian, Allottee or Tribe Name			
	SUNDRY NOTICES	AND REPORTS ON WELLS	0. H hozar			
Do not use t	this form for proposals to dri	Il or to deepen or reentry to a different reservoir.				
	Use "APPLICATION FOR	PERMIT—" for such proposals	7. If Unit or CA, Agreement Designation			
	CURMIT	7. If Old or only 19				
	SUBMIT	IN TRIPLICATE	4			
1. Type of Well			8. Well Name and No.			
X Well	Gas Other		McDougall			
2. Name of Operato	or		9. API Well No.			
Dugan Pro	oduction Corp.		2			
3. Address and Tele		205 1001	10. Field and Pool, or Exploratory Area			
	420, Farmington, NM	87499 325–1821	South Bisti Gallup			
4. Location of Well	I (Footage, Sec., T., R., M., or Survey De	scription)	11. County or Parish, State			
	L & 790' FEL		San Juan, NM			
	T23N, R1OW, NMPM		San Juan, iui			
·· CU	ECK APPROPRIATE BOX	s) TO INDICATE NATURE OF NOTICE, REPOR	RT, OR OTHER DATA			
		TYPE OF ACTION				
TYF	PE OF SUBMISSION	THE OF ROOM	[i]			
X	Notice of Intent	Abandonment	X Change of Plans			
	Notice of Interne	Recompletion	New Construction			
	Subsequent Report	Plugging Back	Non-Routine Fracturing			
	300sequent Report	Casing Repair	Water Shut-Off			
	Final Abandonment Notice	Altering Casing	Conversion to Injection			
	I lim Vonentries	Other	Dispose Water   (Note: Report results of multiple completion on Well			
			Completion of Recompletion Report and Log (orm.)			
12 Describe Drange	ed or Completed Operations (Clearly state a	Il pertinent details, and give pertinent dates, including estimated date of starting all depths for all markers and zones pertinent to this work.)	g any proposed work. If well is directionally diffic			
give subsu	rface locations and measured and true verti-	al depths for all markers and zones pertinent to this work.)				
			•			
			Ma athom			
Ch	ange casing size	from 4½ 10.5 lb. to 5½ 15.5 lb.	No other			
ch	anges in approved	APD.				
			913 913			
			92 MAR 92 MAR			
			T 3 50			
		/ SEBBOUED				
		APPROVED	그 무취			
			# <del>- 3</del>			
		1 1000 0.0 1000	DENVED 17 PH 1:			
	green en	MAR 20 1992	<u>-</u> -			
	₹₩	A STATE OF THE STA	BLM 17 PH 1: 36 ENGTON, N.M			
	Z TO THE RESERVE	TOTA ANAMAOTO				
	ان الإنجاب المواقع في الأنجاب عوال	REA MANAGER	-			
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14.	thereby certify that the foregoing is true and correct	Title	Operations Manager	Date	3-13-92	=
	- Ionn Alexander			-	•	
(This space for Federal or State office use)				Date		_
	Approved by	Title				
	Conditions of approval, if any:		9/ <b>000</b>			
			11 11 11 11 11 11 11 11 11 11 11 11 11			=

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.