1 NMOCD-Aztec 1 NMOCD-Santa Fe 1 File 5 BLM **UNITED STATES** FORM APPROVED Form 3160-5 DEPARTMENT OF THE INTERIOR Budget Bureau No. 1004-0135 (June 1990) BUREAU OF LAND MANAGEMENT Expires: March 31,1993 Lease Designation and Serial No. SUNDRY NOTICES AND REPORTS ON WELLS NM 57445 Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. 6. If Indian, Allotted or Tribe Name Use "APPLICATION FOR PERMIT -" for such proposals SUBMIT IN TRIPLICATE 7. If Unit or CA, Agreement Designation 1. Type of Well Oli Gas Wel Other 8. Well Name and No. 2. Name of Operator Zappa #3 Dugan Production Corp. 9. API Well No. 3. Address and Telephone No. 30 045 29908 P.O. Box 420, Farmington, NM 87499 (505) 325 - 1821 10. Field and Pool, or Exploratory Area Location of Well (Footage, Sec., T., R., M., or Survey Description) 190' FSL & 1190' FEL (SE/4 SE/4) Rusty Chacra Unit P, Sec. 27, T22N, R8W, NMPM 11. County or Parish, State San Juan, NM 12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF ACTION TYPE OF SUBMISSION Change of Plans Abandonment Notice of Intent **New Construction** Recompletion Non-Routine Fracturing 冈 Plugging Back Subsequent Report Water Shut-Off П Casing Repair Conversion to Injection **Altering Casing** Final Abandonment Notice Dispose Water X Other Re-classify pool (Note: Report results of multiple comp ion 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.)\* Reclassify completed interval from Bisti Chacra (pool code 96166) to Rusty Chacra (pool code 84360), new C-102 attached. NMOCD Order R-11445 dated 9-5-00 extended Rusty Chacra to include spacing unit. No changes to well or producing interval, or to Fruitland Coal completion 14. I hereby certify that the foregoing is true and correct 9/24/2001 **Engineering Manager** Date Signed John D. Roe (This space for Federal or State office use) Date Title Approved by Conditions of approval, if any:

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.

District I PO Box 1986, Hohbs, NM 88241-1980 District II PO Drawer DD, Artesia, NM 88211-0719 District III 1000 Rio Brazos Rd., Aztec, NM 87410

PO Box 2008, Santa Fc. NM 87504-2088

API Number

30 045 29908

1 Property Code

District IV

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-102
Revised February 21, 1994
Instructions on back
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

<sup>1</sup> Pool Name

Rusty Chacra

X AMENDED REPORT

\* Well Number

## WELL LOCATION AND ACREAGE DEDICATION PLAT

<sup>1</sup> Property Name

1 Pool Code

84360

013361		Zappa								3	
OGRID No.		Operator Name								* Élevation	
006515		Dugan Production Corporation								6738'	
<sup>10</sup> Surface Location											
UL or lot so.	Section	Township	Range	Lot Ida	Feet from the	North/South line	Fe	et from the Ea	East/West line		County
Р	27	22N	8W	P	790	South	11	190	East S		San Juan
11 Bottom Hole Location If Different From Surface											
UL or lot sa.	Section	Township	Range	Lot Ide	Feet from the	North/South line	Fe	et from the Ea	ast/Wes	(West line County	
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" Dedicated Acres 13 Joint or Infill 14 Consolidation Code 15 Order No.											
DHC-2673											
NO ALLOWARIE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED											
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION											
16							17 OPERATOR CERTIFICATION				
							I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief				
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<b> </b>					to St. 2001			Signature			
					S S S S S S S S S S S S S S S S S S S			John D. Roe Printed Name			
								Engineering Manager			<u> </u>
								September 24, 2001			
					1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			Date			
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