

Form 3160-5
(June 1990)UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

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

SUBMIT IN TRIPLICATE

| | |
|--|---|
| 1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other P&A | 5. Lease Designation and Serial No. 14-20-0603-1403 |
| 2. Name of Operator Dugan Production Corp. | 6. If Indian, Allottee or Tribe Name Navajo Allotted |
| 3. Address and Telephone No. P.O. Box 420, Farmington, NM 87499 (505) 325-1821 | 7. If Unit or CA, Agreement Designation |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1820' FNL - 1520' FWL Sec. 2, T24N, R9W, NMPM | 8. Well Name and No. Blanco Wash 2 |
| | 9. API Well No. 30-045-22482 |
| | 10. Field and Pool or Exploratory Area Potwin PC Ext. / Basin-Fruitland Coal |
| | 11. County or Parish, State San Juan, NM |

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | |
|---|---|--|
| <input type="checkbox"/> Notice of Intent | <input checked="" type="checkbox"/> Abandonment | <input type="checkbox"/> Change of Plans |
| <input checked="" type="checkbox"/> Subsequent Report | <input type="checkbox"/> Recompletion | <input type="checkbox"/> New Construction |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Plugging Back | <input type="checkbox"/> Non-Routine Fracturing |
| | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> Water Shut-Off |
| | <input type="checkbox"/> Altering Casing | <input type="checkbox"/> Conversion to Injection |
| | <input type="checkbox"/> Other | <input type="checkbox"/> Dispose Water |

(Note: Report results of multiple completion on Well Completion 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.)*

11/15/96 This well was plugged & abandoned by filling the casing with 100 sks class "B" with 4% gel. WOC. Tagged cement at surface. Cut off wellhead & set dry hole marker.

I hereby certify that the foregoing is true and correct

Signed Gary Brink Title Operations Manager Date 11/20/96
(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any: _____

APPROVED

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.

*See Instruction on Reverse Side

DISTRICT MANAGER

/s/ Duane W. Spencer