

Form 9-331  
(May 1933)UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SF 078223B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

## 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 ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Jerome P. McHugh

3. ADDRESS OF OPERATOR

P. O. Box 234, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*

See also space 17 below.)

At surface

990' FNL - 1850' FVL

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Colket

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Basin Dakota

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec. 15, T25N, R11W

14. PERMIT NO.

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

6394' GR

12. COUNTY OR PARISH

San Juan

13. STATE

N.M.

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)

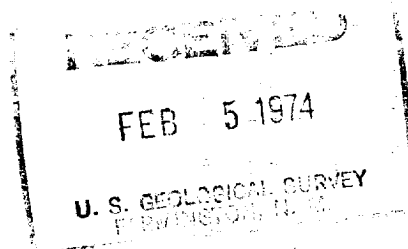
REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT\* ☐Change of Operator ☒(NOTE: Report results of multiple completion on Well  
Completion or Recompletion Report and Log form.)

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.)\*

CHANGE OF OPERATOR effective 2-1-74

From: Dugan Production Corp.

To: Jerome P. McHugh



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

SIGNED Original signed by T. A. Dugan  
Thomas A. DuganTITLE EngineerDATE 2-4-74

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

\*See Instructions on Reverse Side