

Form 3160-5
(June 1990)UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.

SF 078155

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

West Bisti Unit

8. Well Name and No.

West Bisti Unit 153

9. API Well No.

30-045-05619

10. Field and Pool, or Exploratory Area

Bisti Lower Gallup

11. County or Parish, State

San Juan, NM

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☐ Gas Well ☒ Other Injector Well

2. Name of Operator

Dugan Production Corp.

3. Address and Telephone No.

P.O. Box 420, Farmington, NM 87499 (505) 325-1821

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1990' FSL - 1960' FWL

K Sec. 35, T26N, R13W, NMPM

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

TYPE OF SUBMISSION

☒ Notice of Intent☐ Subsequent Report☐ Final Abandonment Notice

TYPE OF ACTION

☐ Abandonment☐ Recompletion☐ Plugging Back☐ Casing Repair☐ Altering Casing☒ Other Long term shut-in TA☐ Change of Plans☐ New Construction☐ Non-Routine Fracturing☐ Water Shut-Off☐ Conversion to Injection☐ 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.)*

A casing integrity test run May 17, 1996 indicated no casing leaks.
It is requested to extend the ~~long term shut-in~~ until ~~May 31, 1997~~.
TA Dec. 7

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

Signed

Title

Operations Manager

Date

9/9/96

(This space for Federal or State office use)

Approved by

Title

Conditions of approval, if any:

A P

ED

SEP 5 1996

NMPM