SUNDRY NOTICES AND REPORTS ON WELLS  Do not use this form for proposals to drill or to despen or reservity to a different reservoir.  SUBMIT IN TRIPLICATE  1. Type of Well  SUBMIT IN TRIPLICATE  1. Well Name set New.  West Blisti Unit 136  9. Any well we well  SUBMIT IN TRIPLICATE  1. Type of Well  SUBMIT IN TRIPLICATE  1. Type of Well  SUBMIT IN TRIPLICATE  1. Yell or CA. Approach Designation  West Blisti Unit 136  9. Any well we well  Submit Submi	Form 3160-5 (June 1990)		O STATES OF THE INTERIOR	PORM APPROVED Budget Buress No. 1004-0135
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Type of Wed   Wed   Wed   Online   West Bisti Unit   136	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			6 M Judise Alleman on Tabe Name
Name of Operator   New Name and Name   Name of Operator   Name of Op				7. If Unit or CA, Agreement Designation
Name of Operator   Dugan Production (orp.     National Production (orp.     National Production (orp.     National Production (orp.     National Production   National Product	** ``			West Bisti Unit
Digan Production (orp.  1. Address and Telephone No. P.O. Box 420, Farth Ington, NN 87499 (505) 325-1821  4. Location of Well (Proage, Sec., T. R., M., or Survey Description)  660' FSL - 1978' FSL Sec. 26, T26N, R134, NMPM  1. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  TYPE OF ACTION  Notice of Instea  Recompletion  No. Notice of Instea  Recompletion  No. Recompletion				
1. Address and Telephone No. P.O. Box 420, FarEington, NM 87499 (505) 325-1821  4. Location of Wolf (Prosses, Sec., T. R. M., or Survey Description)  660' FSL - 1978' FSL Sec. 26, T26N, R134, NMFM  7. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  TYPE OF ACTION    Subsequent Report	•	L		
Bisti Lower Gallup				
Bisti Lower Gallup	P.O. Box 42	0, Farmington, NM	87499 (505) 325-1821	10. Field and Pool, or Exploratory Area
Sec. 26, T26N, R134, NMPM  CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  TYPE OF ACTION  Notice of laser  Abandonness  Subsequent Report  Program Back  Casing Repair  Casing Repair  Casing Repair  Class of Plans  New Construction  Non Routine Fructuring  Conversion to Injection  Class of Plans  Recompletion  Abandonness Notice  Abandonness Notice  Abandonness Notice  Abandonness Notice  Casing Repair  Class Repair where Stars Off  Class Repair with the form  Class of Plans  New Construction  Non Routine Fructuring  Conversion to Injection  Class of Plans  New Conversion to Injection  The Conversion of New Conversion to Injection  Take Operations Manager  Date 9/25/96  Class of Repair  The Operations Manager  Date 9/25/96  Class of Report Plans  New Conversion Plans  New Conversion Plans  New Conversion  New Co	4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			•
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TYPE OF SUBMISSION	Sec. 26, T26	SN, R134, NMPM		San Juan, NM
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Recompletion   Subsequent Report   Preguing Back   Non-Rocinic Fricturing     Final Abandonment Notice   Abardon Medical   Abardon Medical   Abardon Medical     Describe Proposed or Completed Operations Clearly nate all perficent details, and give perficent dates, including estimated date of surring any proposed worf. If well is directionally direction give subsurface locations and measured and true vertical days for all markers and some perfaces to this work. P  Rig up Cementers Inc. Pressure tested casing to 540 psi - held OK (chart on reverse). It is requested to extend the temporary abandonment intil 12/31/97. It is intended to maintain this wellbore for possible conversion to injection.    Describe Proposed or Completed Operations of the following proposed worf. If well is directionally directionally directionally direction gives subsurface to the work. P    Rig up Cementers Inc.   Pressure tested casing to 540 psi - held OK (chart on reverse). It is requested to extend the temporary abandonment intil 12/31/97. It is intended to maintain this wellbore for possible conversion to injection.    Describe Proposed or Completed Operations of the proposed worf. If well is directionally direction in the proposed worf. If well is directionally direction in the proposed worf. If well is directionally direction in the proposed worf. If well is directionally direction in the proposed worf. If well is directionally direction in the proposed worf. If well is directionally direction in the proposed worf. If well is directionally direction in the proposed worf. If well is directionally direction in the proposed worf. If well is directionally direction in the proposed worf. If well is directionally direction in the proposed worf. If well is directionally direction in the proposed worf. If well is directionally direction in the proposed worf. If well is directionally direction in the proposed worf. If well is directionally direction in the proposed worf. If well is directionally direction in the proposed worf. If well is di			)N	
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e 18 U.S.C. Section 1001, makes it a crime fir any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements epresentations as to any matter within its juris-fiction.

