

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

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 checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. SF 078156
2. Name of Operator Dugan Production Corp.	6. If Indian, Allotted or Tribe Name
3. Address and Telephone No. P.O. Box 420, Farmington, NM 87499 (505) 325-1821	7. If Unit or CA, Agreement Designation
Location of Well (Footage, Sec., T., R., M., or Survey Description) 1730' FSL & 595' FWL Sec. 33, T26N, R13W, NMPM	8. Well Name and No. Salge Federal A #5
	9. API Well No. 30 045 28578
	10. Field and Pool, or Exploratory Area Bisti Lower Gallup
	11. County or Parish, State San Juan, NM

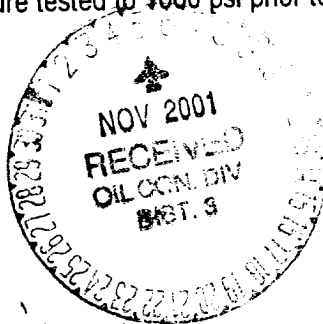
12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

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

Convert well to water disposal in the Gallup formation. Perforations 5066'-5120' will be acidized with 500 gallons of 15% HCL. Water injection will occur through 2-3/8" plastic coated tubing with a tension packer set @ $\pm 5000'$. Casing will be pressure tested to 1000 psi prior to commencing injection.



2001 OCT 17 PM 2:22

Must file for Amoco Permit UIC

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

Signed

Title

Engineer

Date

October 15, 2001

(This space for Federal or State office use)

Approved by

Title

Date

11/1/01

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.

*See Instruction on Reverse Side

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1. Type of Well

☒ Oil
Well

☐ Gas
Well

☐ Other

2. Name of Operator

Dugan Production Corp.

3. Address and Telephone No.

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

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

1980' FNL & 1980' FEL

Sec. 28, T26N, R13W, NMPM

5. Lease Designation and Serial No.

SF 078091

6. If Indian, Allotted or Tribe Name

7. If Unit or CA, Agreement Designation

West Bisti Unit

8. Well Name and No.

West Bisti Unit #127

9. API Well No.

30 045 05684

10. Field and Pool, or Exploratory Area

Bisti Lower Gallup

11. County or Parish, State

San Juan, NM

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TYPE OF SUBMISSION

TYPE OF ACTION

- ☒ Notice of Intent
- ☐ Subsequent Report
- ☐ Final Abandonment Notice

- ☐ Abandonment
- ☐ Recompletion
- ☐ Plugging Back
- ☐ Casing Repair
- ☐ Altering Casing
- ☒ Other Run Casing Liner

- ☐ Change of Plans
- ☐ New Construction
- ☐ Non-Routine Fracturing
- ☐ Water Shut-Off
- ☐ Conversion to Injection
- ☐ Dispose Water

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Operator intends to run 3-1/2" 9.2 lb/ft casing liner inside of existing 5-1/2" casing string. The liner is to be run to 5,000' and cemented back to the surface. This procedure is needed to allow a casing mechanical integrity test when the well is converted to injection service. Plugging the well will not be hindered by the internal string because both the 3-1/2" and 5-1/2" casing strings can be penetrated by perforating so that cement can be placed outside the 5-1/2" original string.

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

Signed

John Alexander
John Alexander

Vice-president

Date

11/21/01

(This space for Federal or State office use)

Approved by

Title

Date

11/27/01

Conditions of approval, if any:

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2. Name of Operator Dugan Production Corp.		6. If Indian, Allotted or Tribe Name
3. Address and Telephone No. P.O. Box 420, Farmington, NM 87499 (505) 325 - 1821		7. If Unit or CA, Agreement Designation West Bisti Unit
Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980' FNL & 1980' FEL Sec. 28, T26N, R13W, NMPM		8. Well Name and No. West Bisti Unit #127
NOV 20 2001		9. API Well No. 30 045 05684
REAR R1		10. Field and Pool, or Exploratory Area Bisti Lower Gallup
		11. County or Parish, State San Juan, NM

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<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>Convert to injection timing</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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We have received a permit from USEPA to convert this well to injection service. Work to complete this conversion will begin immediately. The request for long term shut-in expires 11/1/2001. We ask that this be extended until conversion is complete.

NOV 2001

MAR 21 2002

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

Signed

John Alexander
Vice-president

Date

11/19/01

(This space for Federal or State office use)

Approved by

Title

Date

11/27/01

Conditions of approval, if any: