| I.a. 100As  | ITED STATES AT OF THE INTERIOR  | PORM APPROVED Budget Burese No. 1004-0135  |
|---|---|--|
|   | LAND MANAGEMENT   | Expires: March 31, 893  5. Lease Designation and Serial No.  |
| SIINDRY NOTICES   | AND REPORTS ON WELLS  | NM 013492  |
| Do not use this form for proposals to dr  | ill or to deepen or reentry to a different res<br>R PERMIT—" for such proposals   | 6. If Indian, Alloctoe or Tribe Name  Brvoir.  |
| SUBMIT  | IN TRIPLICATE   | 7. If Unit or CA, Agreequat Designation  |
| I. Type of Well  Oll Gu Well Other  Ober  |   | West Bisti Unit  |
| P. Name of Operator  Dugan Production Corp.   |   | West Bisti Unit 114  |
| Address and Telephone No.   |   | 30-045-05750   |
| P.O. Box 420, Farmington, NM 87499 (505) 325-1821   |   | 10. Field and Pool, or Exploratory Area  |
| . Location of Well (Footage, Soc., T., R., M., or Survey De   | secription)   | Bisti Lower Gallup   |
| 1980' FSL - 660' FWL  |   | 11. County or Parish, State  |
| Sec. 20, T26N, R13W, NMPM   |   | San Juan, NM   |
| CHECK APPROPRIATE BOX(  | s) TO INDICATE NATURE OF NOTICE, F  | REPORT, OR OTHER DATA  |
| TYPE OF SUBMISSION  | TYPE OF AC  | CTION  |
| Notice of Intent  | Abandooment   | Charge of Plans  |
| m.  | Recompletion  | New Construction,  |
| X Subsequent Report   | Plugging Back Casing Repair   | Non-Routine Fracturing Water Shut-Off  |
| Final Abandonment Notice  |   |  |
|   | C AREAN CAUNE   | L_J Conversion to Insection  |
| Describe Proposed or Completed Operations (Clearly state all  | Other Return to Proceed dates, including estimated date of depths for all markers and some pertinent to this work.)*  | (Hete: Report results of multiple completion on Well<br>Completion or Recompletion Report and Log form.)   |
| Describe Proposed or Completed Operations (Clearly state all give subsurface locations and measured and true vertical   | Other Return to Proceed and Street descriptions of the section of | (Note: Report results of multiple completion on Well Completion or Recompletion Report and Lag form.)  If starting any proposed work. If well is directionally drilled,                      |
| Describe Proposed or Completed Operations (Clearly state of give subsurface locations and measured and true vertical term shut—in is cancel thereby certify that the foregoing is true and correct Signed John Marsander  | Other Return to Proceed and Street descriptions of the section of | Hote: Report results of multiple completion on Well Completion or Recompletion Report and Lag form.)  of starting any proposed work. If well in directionally drilled,  the request for long |
| Describe Proposed or Completed Operations (Clearly state off give autourface locations and measured and true vertical control of the control | perdicent details, and give perdicent dates, including estimated date of depths for all markers and somes perdicent to this work.)*  returned to production so the celled.  One of the color of the color of the celled.  One of the celled.  | Hote: Report results of multiple completion on Well Completion or Recompletion Report and Lag form.)  If starting any proposed work. If well is directionally drilled,  the request for long |