Form 3160-5 (June 1990)			FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993 5. Lease Designation and Serial No. NM 012737 6. If Indian, Allottee or Tribe Name
1. Type of Well	7. If Unit or CA, Agreement Designation		
Oil Well 2. Name of Operator	8. Well Name and No.		
Dugan 1	Huerfanito 6 9. API Well No. 30-045-05910		
P.O. B	10. Field and Pool, or Exploratory Area Basin Dakota		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1190' FSL - 1450' FWL			11. County or Parish, State
Sec. 11, T26N, R9W, NMPM			San Juan, NM
CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA			RT, OR OTHER DATA
	TYPE OF SUBMISSION TYPE OF ACTION Abandonment		
	sequent Report	Abandonment Recompletion Plugging Back	Change of Plans New Construction Non-Routine Fracturing
Fina	d Abandonment Notice	Casing Repair Altering Casing X Other long-term shut-in	Water Shut-Off Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well
The	New Mexico Oil C	onservation Division has reque	ested our
Thi: exi:	ended action on t s well in unable sting market cond uested.	his well. to produce in paying quantitie itions. A long term shut-in s	es under status is
50 % € 10 00 10 00	662		
: · 	WL2 01092	SEE ATTACHED FOR CONDITIONS OF APPROVAL	
	, CON, CO Dist. 3	THIS APPROVAL EXPIRES JUL 0 1 1993	_
Signed	the foregoing is true and correct	Tide Operations Manager	ARPROYED
(This space for Feder	al or State office use)		AS AMENDED
Approved by Conditions of approvi	st, if any:	Tide	
Title 18 U.S.C. Section 1: or representations as to ar	001, makes it a crime for any person knowny matter within its jurisdiction.	vingly and willfully to make to any department or agency of the United S	ANEAMANAGER tates any false, fictitious or fraudulent statementa