5 MMS, 1 File

LINITED STATES

	Budget Bureau No	42-R1424
5. LEASE		

Form Approved.

UNITED STATES						
DEPARTMENT	OF	THE	INTERIOR			
GEOLOG	ICAL	SUR	VEY			

_	•	•		
S	F		07894 4A	

DEPARTMENT OF THE INTERIOR	∤°SF 078944A
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir, Use Form 9-331-C for such proposals.)	7. UNIT AGREEMENT NAME
	8. FARM OR LEASE NAME Donmac
vell gas other Dry Hole	9. WELL NO.
2. NAME OF OPERATOR	11
DUGAN PRODUCTION CORP.	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Wildcat
P. O. Box 208, Farmington, NM 87499 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	11. SEC., T., R., M., OR BLK. AND SURVEY OF AREA
below.) AT SURFACE: 1650' FNL - 790' FWL AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	Sec 9, 126N, R12W 12. COUNTY OR PARISH 13. STATE San Juan New Mexico
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	14. API NO.
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD
REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* (other) SUBSEQUENT RED T V U. S. GEOLOGICAL S FARMINGTON. N. (Amending Sun-	82 (NOTE: Report results of multiple completion or zon
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly stat including estimated date of starting any proposed work. If well is d measured and true vertical depths for all markers and zones pertinent.)	firectionally drilled, give subsurface locations an
Plugged and abandoned this well in the	he following manner:
 Filled 2-7/8" O.D., 6.5#, J-55, 8 to surface using 35 sacks cement Cut off casing 3' below surface. Filled all pits. 	8R, EUE casing from PBTD 1241'
1 Classed wall leasting of all and	

Cleaned well location of all equipment, pipe, junk and trash.

NAPI has waived surface restoration because of location in planted field.

6. Removed tie-downs.

Subsurface Safety Valve: Manu. and Type	P-1, 11.		Set @	Ft.
18. I hereby certify that the foregoing is true and correct	1	,2		
Sherman E. Dugan TITLE Agen	t	DATE	•	
•				
(This space for Federa	l or State office use	·)		_

APPROVED BY CONDITIONS OF APPROVAL, IF ANY:

APPROVED AS AMENDED

Approved as to plugging of the well bore. Liability under bond is retained until *See Instructions on Reverse Side surface restoration is completed.

AREA MANAGER