

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:		OIL WELL ☒	GAS WELL ☐	DRY ☐	Other _____		
b. TYPE OF COMPLETION:		NEW WELL ☐	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☒	DIFF. RESVR. ☐	Other _____
2. NAME OF OPERATOR Dugan Production Corp.							
3. ADDRESS OF OPERATOR P O Box 208 Farmington, NM 87401							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1600' FNL - 1600' FWL At top prod. interval reported below At total depth							
14. PERMIT NO.				DATE ISSUED			
15. DATE SPUDDED 10-20-73				16. DATE T.D. REACHED 10-28-73		17. DATE COMPL. (Ready to prod.) 6-27-80	
18. ELEVATIONS (DF, REB, BT, GR, ETC.)* 6142' GR				19. ELEV. CASINGHEAD			
20. TOTAL DEPTH, MD & TVD 5800		21. PLUG, BACK T.D., MD & TVD 5600'		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY →	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 4704' - 5206'						25. WAS DIRECTIONAL SURVEY MADE	
26. TYPE ELECTRIC AND OTHER LOGS RUN IES CNL FDC - GR						27. WAS WELL CORED No	

28. CASING RECORD (Report all strings set in well)							
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD		AMOUNT PULLED	
8-5/8"	24#	625'	12 1/4"	400 sx			
5 1/2"		5800'	7-7/8"	582 cu. ft.			
29. LINER RECORD							
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-3/8"	5182'	
31. PERFORATION RECORD (Interval, size and number)				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
4704-4716		4824-4834		DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
4732-4740		4908-4932					
4806-4816		5198-5206					
(All one shot per foot)							

33. PRODUCTION							
DATE FIRST PRODUCTION 6-27-80		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Waiting on pumping equipment				WELL STATUS (Producing or shut-in) Shut-in	
DATE OF TEST 6-27-80	HOURS TESTED 6 1/2	CHOKE SIZE ---	PROD'N. FOR TEST PERIOD →	OIL—BBL. 2.3	GAS—MCF. 37 est.	WATER—BBL. 0	GAS-OIL RATIO 2467
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE →	OIL—BBL. 15	GAS—MCF. 37 est.	WATER—BBL. 0	OIL GRAVITY-API (CORR.) 40 est.	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)						TEST WITNESSED BY Jacobs	

35. LIST OF ATTACHMENTS		
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records		
SIGNED Thomas A. Dugan	TITLE Engineer	DATE 12-19-80

*(See Instructions and Spaces for Additional Data on Reverse Side)

NMOC

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all ~~types of~~ wells and leases to either a Federal agency or a State agency, and/or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formations, and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s), and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

38. GEOLOGIC MARKERS	NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH
	<u>Log tops</u>			
	Pictured Cliffs	1162'		
	Lewis	1273'		
	Cliff House	2608'		
	Menefee	2675'		
	Point Lookout	3645'		
	Mancos	3877'		
	Gallup	4675'		
	Greenhorn	5565'		
	Graneros	5621'		
	Dakota	5680'		