

6 BLM 1 File
UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	5. LEASE DESIGNATION AND SERIAL NO. NM 12027
2. NAME OF OPERATOR DUGAN PRODUCTION CORP.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P O Box 208, Farmington, NM 87499	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1850' FNL - 990' FEL	8. FARM OR LEASE NAME Chaco Plant
14. PERMIT NO.	9. WELL NO. 2
	10. FIELD AND POOL, OR WILDCAT WAW Fruitland PC
15. ELEVATIONS (Show whether OF, RT, GR, etc.) 5989' GR	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 17, T 26N, R 12W, NMPM
	12. COUNTY OR PARISH San Juan
	13. STATE NM

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BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

18. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACURE TREAT	<input type="checkbox"/>	FRACURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other)	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		
PULL OR ALTER CASING	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
ABANDON*	<input checked="" type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
CHANGE PLANS	<input type="checkbox"/>		

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

17. 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.)*

Plan to plug and abandon the subject well as follows:

1. Fill 2-7/8" OD, 6.5#, 8 RD, EUE tubing for casing from P.B.T.D. 1166' surface using 32 sx class "B" cement.
* plug 0-175' outside 2 7/8" casing
2. Install permanent dry hole monument.
3. Fill all pits.
4. Clean well location of all equipment, pipe, junk and trash.
5. Restore surface.
6. Cut off tie-downs.

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OF CON. DIV.
DIST. 3

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

SIGNED <u>Sherman E. Dugan</u>	TITLE <u>Geologist</u>	APPROVED <u>AS AMENDED</u>
(This space for Federal or State office use)		DATE <u>MAY 20 1987</u>
APPROVED BY <u>al 2</u>	TITLE <u>AREA MANAGER</u>	
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side

NMOCG