## 5-USGS (Farmington) 1-File Form 9-331 Dec. 1973

## UNITED STATES

UNITED STATES	5. LEASE NM 12027
DEPARTMENT OF THE INTERIOR  GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
Do not use this form for proposals to drill or to deepen or plug back to a different eservoir, Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME Chaco Plant
1. oil gas well other	9. WELL NO. 1.5 2 1
2. NAME OF OPERATOR  Dugan Production Corp.	10. FIELD OR WILDCAT NAME WAW FR PC
3. ADDRESS OF OPERATOR  Pow 208 Farmington, NM 87401	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	Sec 17 T26N R12W
below.) AT SURFACE: 790' FSL - 790' FEL AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE NM
AT TOTAL DEPTH:	14. API NO. 1345 2 3445
<ol> <li>CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA</li> </ol>	15. ELEVATIONS (SHOW DF, KDB, AND WD)
	6004 ' GI
REQUEST FOR APPROVAL TO:  SUBSEQUENT REPORT OF:  TEST WATER SHUT-OFF  FRACTURE TREAT  SHOOT OR ACIDIZE	
REPAIR WELL DEPUTE CASING DEPU	(NOTE: Report results of multiple completion or zone change on Form 9–330:)
MULTIPLE COMPLETE	
CHANGE ZONES	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly sta	te all pertinent details, and give pertinent dates, directionally drilled, give subsurface locations and
including estimated date of starting any proposed work. If wen is measured and true vertical depths for all markers and zones pertine ::	ent to this work.)*
The same of the sa	laid down drill pipe Ran 41
its 2-7/8" OD 6 5# 8R FIJE the for csg. TE 1231.56' set :0-1230' GL. Gemented	
w/75 sx 2% lodense w/1/4# cello flake per w/1/4# cello flake per sx. Good circulati	SX TOTTOMED BY DO SX CLUSS. The Hear
to surface. POB @ 3:00 p.m. 5-23-80. Top	
ACCEPTED	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
11171	cement of the well produce and the second of the well produce and the second of the se
JUN	3 1980 Residence of the second
FARMING	TON DISTRICT
Subsurface Safety Valve: Manu. and Type	
18. I hereby certify that the foregoing is true and correct	and
VI WILLIAM President	##
SIGNED Thomas A. Dugan  (This space for Federal or State	
·	office use)
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:	and
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