

5 BLM 1 McHugh 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.)

RECEIVED

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> P & A	5. LEASE DESIGNATION AND SERIAL NO. NM 37908
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 1650' FNL & 1850' FWL	8. FARM OR LEASE NAME Bronco
14. PERMIT NO.	9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5964' GL	10. FIELD AND POOL, OR WILDCAT WAW Fruitland - PC Ext.
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 4, T26N, R12W, NMPM
	12. COUNTY OR PARISH San Juan
	13. STATE NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)			

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input checked="" type="checkbox"/>
(Other)			

(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.)*

Plugged and abandoned the subject well as follows on 8-6-86:

1. Filled 2-7/8" OD, 6.5#, J-55, NEUE, 10 RD tubing for casing from P.B.T.D. 1368' to surface using 39 sx (46 cf) of class "B" neat cement.
2. Installed permanent dry hole monument.
3. Filled all pits.
4. Cleaned well location of all equipment, pipe, junk and trash.
5. Dugan Production Corp. is now preparing surface restoration, reseeding in accordance with Environmental Stipulations (Section #3) approved in APD.
6. Cut off tie-downs.

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

SIGNED Sherman E. Dugan
(This space for Federal or State office use)

TITLE Geologist

DATE 8-7-86

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

APPROVED
AS AMENDED

DATE _____

*See Instructions on Reverse Side

AREA MANAGER