## 5 BLM 1 File

or representations as to any matter within its jurisdiction.

Form 3160-5 (June 1990)

## **UNITED STATES**

DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**  FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31,1993

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  Use "APPLICATION FOR PERMIT." for such proposals    1. Type of Wist	SUNDRY NOTICES AND REPORTS ON WELLS	5. Lease Designation and Serial No. NM 61
Type of Well		6. If Indian Allotted or Tribe Name
1. Type of Well		
2. Nem of Operator Dugan Production Corp. 3. Well Name and No. Rachell #90 3. Address and Telephone No. P. O. Box 420 . Farmington, NM 87499 (505) 325 - 1821 30 045 28834 10. Feed and Pool, or Epicoratory Area Basin Fruitland Coal 11. County or Partials, State San Juan, NM 12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF SUBMISSION Notice of Intent Abandonment Plugging Back Non-Routine Fracturing Altering Casing Other Extend APD Dispose Water Other Submission Submission Non-Routine Fracturing Altering Casing Conversion to Injection New Construction New	1. Type of Well Oil Gas	7. If Unit or CA, Agreement Designation
Rachel #90   Rachel #90   Pulgan Production Corp.   Rachel #90   Rac		B. Weil Name and No.
3. Actives No. P.O. Box 420 , Farmington, NM 87499 (505) 325 - 1821 30.045 29834  1560' FNL & 790' FEL (SENE)  Unit H, 'Sec. 34, T26N, R12W, NMPM  12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  Notice of Intent   Abandonment   Abandonment   Recompletion   Revolution Fracturing   Revolution   Recompletion   Revolution   Recompletion   Revolution   Recompletion   Recompletion   Revolution   Recompletion   Revolution   Recompletion   Recompletion		
Lossine of Wed (Poolage, Sec., T. R., N., or Survey Description)  1560' FNL & 790' FEL (SENE)  Unit H, 'Sec. 34, T26N, R12W, NMPM  12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  Notice of Intent    Abandonment   Abandonment   Change of Plans		9. API Well No.
Basin Fruitland Coal	P.O. Box 420 , Farmington, NM 87499 (505) 325 - 1821	30 045 29834
Unit H, 'Sec. 34, T28N, R12W, NMPM  12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION    Notice of Intent	Location of Well (Footage, Sec., T., R., M., or Survey Description)	10. Field and Pool, or Exploratory Area
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION    Abandonment   Change of Plans		
TYPE OF SUBMISSION    Notice of Intent		· · · · · · · · · · · · · · · · · · ·
Notice of Intent	· · · · · · · · · · · · · · · · · · ·	THER DATA
Subsequent Report   Recompletion   New Construction   Non-Routine Fracturing   Water Shut-Off   Casing Repair   Casing Repair   Conversion to Injection   Dispose Water   Conversion to Injection   Conversion (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.)*    Request a 6 month extension on approved APD.   Request   Approved by	THE OF COMMISSION	Change of Plans
Casing Repair   Water Shut-Off   Altering Casing   Conversion to Injection   Dispose Water   Chair   State all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally direct, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*    Request a 6 month extension on approved APD.   Casing state all pertinent details, and give pertinent to this work.)*    Request a 6 month extension on approved APD.   Casing State   Casing Repair   Casing Re		-
Final Abandonment Notice   Altering Casing   Dispose Water   Dispose Water   Gloss : Security   Dispose Water   Gloss : Security   Gloss : Gloss	Subsequent Report Plugging Back	₹
Some   Dispose Water   Convenient Great   Conveni		
(their: Report results of multiple completed of Completed Operations (Clearly state all pertnent 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.)*  Request a 6 month extension on approved APD.  14. I hereby centify that the foregoing is true and correct  Signed	<u> </u>	
13. Describe Proposed or Completed Operators (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.)*  Request a 6 month extension on approved APD.  14. I hereby certify that the foregoing is true and correct  Signed     Kurt Fagretius   Title   Date	Other Extend APD	(Note: Report results of multiple completion on Well
Signed Kurl Fagrelius Trite Engineer Date 1/18/2002  (This space for Federal or State office use)  Approved by Trite Date  Conditions of approval, if any:		
Approved byTitleDate	Signed Kurt Fagrelius Title Engineer Date	1/18/2002
Conditions of approval, if any:	(This space for Federal or State office use)	
with	Approved by Title Date	
		Ections of Equality of Education