

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on reverse 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 ☐ GAS WELL ☒ OTHER		7. UNIT ASSIGNMENT NAME	
2. NAME OF OPERATOR DUGAN PRODUCTION CORP.		8. FARM OR LEASE NAME Hugh Lake	
3. ADDRESS OF OPERATOR P.O. Box 420, Farmington, NM 87499		9. WELL NO. 3	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 810' FNL - 1080' FEL		10. FIELD AND POOL, OR WILDCAT Wildcat Pictured Cliffs	
14. PERMIT NO.		11. SEC. T. R. N. OR S.E. AND SURVEY OR AREA Sec. 33, T27N, R12W, NMPM	
15. ELEVATIONS (Show whether SP, ST, GL, etc.) 5846' GL		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:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	☐	WATER SHUT-OFF	☐
FRACURE TREAT	☐	FRACURE TREATMENT	☐
SHOOT OR ACIDIZE	☐	SHOOTING OR ACIDIZING	☐
REPAIR WELL	☐	(Other)	☐
(Other) Long-term shut-in	☒	(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.)

Request approval for long-term shut-in status due to the following:
Sales line unavailable.

RECEIVED

JAN 04 1991

OIL CON. DIV
DIST. 3

THIS APPROVAL EXPIRES

NOV 18 1990

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

SIGNED <u>Jim L. Jacobs</u>	TITLE <u>Geologist</u>	DATE <u>1-13-90</u>
(This space for Federal or State office use)		
APPROVED BY <u>[Signature]</u>	TITLE <u>AREA MANAGER</u>	DATE <u>DEC 19 1990</u>
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side