

5 BLM, Fmn

I File

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

5. LEASE
SF 078009-C

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Rex

9. WELL NO.
3J

10. FIELD OR WILDCAT NAME
WAW Pictured Cliffs

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 18, T27N R13W

12. COUNTY OR PARISH | 13. STATE
San Juan | NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
6060' GL; GL. = RKB

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 Form 9-331-C for such proposals.)

1. oil well gas well other

2. NAME OF OPERATOR
DUGAN PRODUCTION CORP.

3. ADDRESS OF OPERATOR
P O Box 208, Farmington, NM 87499

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 790' FNL - 1850' FWL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

PULL OR ALTER CASING

MULTIPLE COMPLETE

CHANGE ZONES

ABANDON*

(other)

SUBSEQUENT REPORT OF:

Spud and surface casing

RECEIVED
NOV 17 1983
BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

RECEIVED
NOV 21 1983
OIL CON. DIV.
DIST. 8

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.)*

11-15-83 Moved in and rigged up Morrow Drilling Co. rig. Spudded 8-3/4" hole at 1:00 p.m.* Drilled to 100'. Ran 3 jts. 7" O.D., 23#, K-55, 8 rd, ST&C casing. T.E. 97.37' set at 98' GL Cemented with 35 sx class "B" neat (41 cf). POB at 4:00 p.m. 11-14-83. Cement circulated. [*11-14-83]

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

18. I hereby certify that the foregoing is true and correct
ACCEPTED FOR RECORD
SIGNED Jim L. Jacobs TITLE Geologist DATE 11-15-83
NOV 18 1983
(This space for Federal or State office use)

APPROVED BY _____ TITLE NMOCC DATE _____
CONDITIONS OF APPROVAL, IF ANY: _____
RV smm