

5 BLM 1 File
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

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 and in accordance with any State requirements. See also space 17 below.)
At surface
1850' FNL & 1850' FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, OR, etc.)
6011' GL

5. LEASE DESIGNATION AND SERIAL NO.
SF-077978-C

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Fullerton

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT
Amarillo-Gallup/
Basin Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR ARRA
Sec. 34, T28N, R13W, NMPM

12. COUNTY OR PARISH
San Juan

13. STATE
NM

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BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

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) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

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

(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.)*

Remedial Work 11-8-85 thru 11-15-85

M.I. & R.U. Pulling Unit. N.U. BOP and pulled tubing. Picked up retrievable packer and located hole in casing between 3363' and 3394'. Set 5 1/2" Cast Iron Bridge Plug @ 4990' on wireline. Squeezed hole in casing with 150 sx class "B" cement. Drilled out cement and pressure tested casing to 1050 psi. Held OK. Drilled out bridge plug @ 4990'. Milled out model "D" packer @ 6170' and cleaned out to 6256'. Ran and landed 2-3/8" tubing @ 6210' with 5 1/2" Baker Model "R" packer @ 5549'. Loaded back side with inhibited packer fluid.

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GEOL. DIV.

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

SIGNED Jim L. Jacobs
(This space for Federal or State office use)

TITLE Geologist

DATE 11-19-85
ACCEPTED FOR RECORD

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE NOV 20 1985

FARMINGTON RESOURCE AREA

BY Smm