Form 3160-5 June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

FORM APPROVED May 1004-0135

COLUMN COM	PEG 140.	100-01	~
Expires:	March :	31,1993	

SUNDRY NOTICES AND REPORTS ON WELLS 14-20-603-2015 Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. 6. If Indian, Allotted or Tribe Name Use "APPLICATION FOR PERMIT -" for such proposals Navajo SUBMIT IN TRIPLICATE Type of Well 7. If Unit or CA. Agreement Designation Well Well 8 1999 Other . Name of Operator 8. Well Name and No. Pet Inc. 5 **Dugan Production Corp.** Address and Telephone No. 9, API Well No. 30-045-21060 3451 3 3.O. Box 420, Farmington, NM 87499 (505) 325 - 1821 ocation of Well (Footage, Sec., T., R., M., or Survey Description) 10. Field and Pool, or Exploratory Area Basin Fruitland Coal/ 790' FNL & 790! FEL, Sec. 35, T28N, R15W, NMPM Oio Fruitland Sand-PC 11. County or Parish, State San Juan, NM 2. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Abandonment Change of Plans Recompletion **New Construction** Subsequent Report Plugging Back Non-Routine Fracturing Casing Repair Water Shut-Off Final Abandonment Notice Altering Casing Conversion to Injection Pool Designation Dispose Water pletion Report and Log form.)

3. 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.)*

> Due to the creation of Basin Fruitland Coal Gas Pool and NMOCD Orders R-8768 and R-8769, the subject well is now classifed and required by NMOCD to be reported as a commingled well. We request that the production on the MMS-3160 be reported as a commingled well with the following approved allocation factors:

Basin Fruitland Coal - 47% Ojo Fruitland Sand-PC - 53%

. I hereb	y certify that the foregoing is true and correct					
Signed	LeAnna Hanhardt	Prod. Acct. Supervisor	Date	10/20/99		
his space for Federal or State office use)						
xproved b	/s/ Joe Hewitt	Title The main that the section of t	Date			
anditions of approval, if any:						
			pt.			
se 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements						

