

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

5. Lease Designation and Serial No.

SF 078110

6. If Indian, Altonce or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Federal I 6

9. API Well No.

30-045-23207

10. Field and Pool, or Exploratory Area

Harper Hill FR Sand PC

11. County or Parish, State

San Juan, NM

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

Dugan Production Corp.

3. Address and Telephone No.

P.O. Box 420, Farmington, NM 87499 (505) 325-1821

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1590' FNL - 1800' FEL  
Sec. 1, T29N, R14W, NMPM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent  
☐ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☒ Other Repair or P&A  
☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)\*

Plan to set bridge plug above Pictured Cliffs perforations and swab test Fruitland Sand. If Fruitland is capable of production, the casing will be pressure tested and the well returned to production. If the Fruitland is non-productive, the well will be plugged by pumping Class B cement down the 2-7/8" casing to completely fill the well bore.

Work will commence by 3-1-94.

RECEIVED  
JAN 10 1994  
OIL CON. DIV  
DIST. 3

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

Signed

*John Alexander*

Title

Operations Manager

Date

11/30/93

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any:

Title 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 or representations as to any matter within its jurisdiction.

\*See Instruction on Reverse Side

JAN 03 1994

NMOCD

DISTRICT MANAGER