UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

Form 9-331	Budget Bureau No. 42-R1424
Dec. 1973 UNITED STATES	5. LEASE
DEPARTMENT OF THE INTERIOR	NM 21465
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON W	7. UNIT AGREEMENT NAME
(Do not use this form for proposals to drill or to deepen or plug back to reservoir. Use Form 9-331-C for such proposals.)	8. FARM OR LEASE NAME
TESELVOII, COO	Crete Coup
1. oil gas other	9. WELL NO.
Woll	1
2. NAME OF OPERATOR	10. FIELD OR WILDCAT NAME
DUGAN PRODUCTION CORP.	Basin Dakota
3. ADDRESS OF OPERATOR	11. SEC., T., R., M., OR BLK. AND SURVEY OF
P.O. Box 208, Farmington, NM 87499	
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See	Sec. 24 T30N R15W
below.)	12 COUNTY OR PARISH 13. STATE

1.	oil well		gas well	K)	other			
		E OF (
. [OUGA	N PRO	DUCT	TON	_CORP			
3.	ADD	RESS C	OF OPE	RAT	OR			•
F	0.0.	Box	208,	Far	<u>rmington.</u>	_NM _	87499_	
4.	LOC	NOITA	OF WE	LL (F	REPORT LOCA	MOITA	CLEARLY.	See space 17
	belo	w.)			L 501- 7	00 F	- 1	
	AT S	SURFAC	E:	850	' FSL - 7	90 F	C.L.	
		TOP PE			VAL:			
		OTAL						OF NOTICE
١6.	CHE	CK AP	PROPR	IATE	BOX TO IN	DICATI	NATURE	OF NOTICE,
	REP	ORT, C	R OTH	IER I	DATA			

SUBSEQUENT REPORT OF:

15. ELEVATIONS (SHOW DF, KDB, AND WD) 5378' GL

NM

REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* Extension of (other)

RECE (NOTE-REPORT Soults of multiple completion or zone change on Form (9-330.) BUREAU OF LAND MANAGEMENTERS

San Juan

14. API NO.

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 extension of APD due to our drilling schedule.

Expect to spud about 9-1-84.

MAY 2 1 1984

OIL CON. DIV

Tuon	Ft.
Subsurface Safety Valve: Manu. and Type	
18. I hereby certify that the foregoing is true and correct	
SIGNED MJim L. Jacobs TITLE Geologist	DATE 4-16-84
The forders of State Office USE	
/S/ HOWARD L BRYAN, JRATINETT ACT TO	_ DATE
APPROVED BY CONDITIONS OF APPROVAL, IF ANY: This approval expires November	4, 1984. Drilling operations
must be commenced by that date.	