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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Dry Hole		7. Unit Agreement Name
2. Name of Operator Dugan Production Corp.		8. Farm or Lease Name Valdez
3. Address of Operator Box 234, Farmington, NM 87401		9. Well No. 1
4. Location of Well UNIT LETTER <u>D</u> <u>850</u> FEET FROM THE <u>North</u> LINE AND <u>870</u> FEET FROM THE <u>West</u> LINE, SECTION <u>20</u> TOWNSHIP <u>31N</u> RANGE <u>1E</u> NMPM.		10. Field and Pool, or Wildcat Wildcat
15. Elevation (Show whether DF, RT, GR, etc.) 7490' GR		12. County Rio Arriba

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

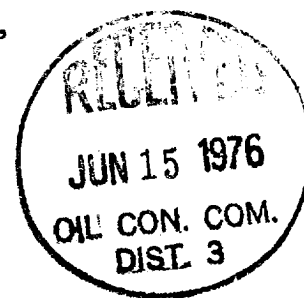
REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☒

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

This well was plugged and abandoned as follows 11-16-75:

1. Spotted 35-sk cement plug from 1540-1440'
2. Spotted 25-sk cement plug from 120-40'
3. Spotted 4-sk cement plug in surface csg
4. Installed dry hole marker, cleaned up location, and abandoned well.



18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Thomas A. Dugan TITLE Engineer DATE 6-14-76
APPROVED BY AR Kendrick TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: