

5 MMS, Fmn

1 File

Form Approved.
Budget Bureau No. 42-R1424

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☐ well gas ☐ well other ☒ Dry Hole

2. NAME OF OPERATOR
DUGAN PRODUCTION CORP.

3. ADDRESS OF OPERATOR
P O Box 208, Farmington, NM 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1850' FNL - 1850' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

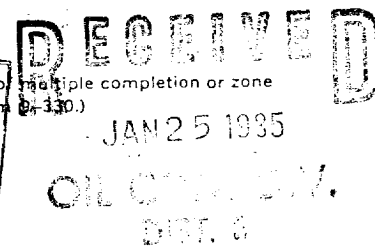
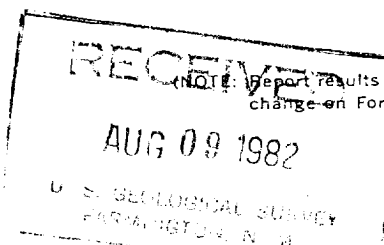
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

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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.)*

Plugged and abandoned well as follows:

1. Filled 2-7/8" O.D., 6.4#, C-45, 10V, EUE tubing for casing from 1437' → PBTD 4469' to surface using 45 sx class "B" neat cement on 7-30-82. *(squeezed perfs)*
2. Installed permanent dry hole monument.
3. Filled all pits.
4. Cleaned well location of all equipment, pipe, junk, and trash.
5. Cut off tie-downs.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Sherman E. Dugan TITLE Agent DATE 8-6-82

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

APPROVED
AS AMENDED

JAN 22 1985

/s/ J. Stan McKee
M. MILLENBACH
AREA MANAGER

Approved as to plugging of the well bore.
Liability under bond is retained until
surface restoration is completed.

Instructions on Reverse Side

NMCCC