

6 MMS, Fmn 2 MF 1 File
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

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: 790' FNL - 790' FWL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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

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

SUBSEQUENT REPORT OF:

RECEIVED
JUL 12 1983

U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

XX Spud & 8-5/8" Casing

5. LEASE
NM 19163

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Turk's Toast

9. WELL NO.
2

10. FIELD OR WILDCAT NAME
Basin Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 19 T30N R14W

12. COUNTY OR PARISH | 13. STATE
San Juan | NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
5408' GL; 5510' RKB

(NOTE: Report benefits of reworking, completion, or other changes on Form 9-330.)

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OIL CON. DIV.

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.)*

7-8-83 Move in & Rig up Four Corners Drilling Co. Rig #5.

7-9-83 Drilling @ 800' with water.
1° @ 220'; 3/4° @ 719'. Finished rigging up. Spudded 12 1/4" hole at 10:45 a.m. 7-8-83. Drilled to 220' RKB. Ran 5 jts. 8-5/8" O.D., 24#, 8 Rd, ST & C casing. T. E. 200' set at 212' RKB. Cemented with 135 sx class "B" plus 2% Ca.Cl. (159.3 cu. ft.) P.O.B at 3:00 p.m. 7-8-83. Circulated 2 bbls. cement.

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

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

SIGNED Jim L. Jacobs TITLE Geologist DATE 7-11-83

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE ACCEPTED FOR RECORD
CONDITIONS OF APPROVAL, IF ANY:

JUL 26 1983

*See Instructions on Reverse Side

NMOCC

FARMINGTON RESOURCE AREA
FARMINGTON, NEW MEXICO
BY Smm