(November 1983) (Formerly 9-331) DEPARTMENT OF THE INTERIOR verse side) BUREAU OF LAND MANAGEMENT	Expires August 31, 1985 5. LEASE DESIGNATION AND SERIAL NO. SF-078051-A
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—" for such proposals.)	SUM SHOIAN, ALLOTTER OR TRUE NAME
OIL GAR OTHER PSA	2. UMIN PORTEMENT NAME
DUGAN PRODUCTION CORP.	Storey
PO Box 420 Farmington, NM 87499	9. WHILE NO.
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface	10. FIELD AND POOL, OR WILDCAT Kiffen - Nacimiento
1.190' FSL S 1812' FEL	11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA
14. PERSIT NO. 15. ELEVATIONS (Show whether DF. RT. GR. etc.)	Sec.34,T32N,R11W, NMPM
14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5997' GL; 6009' RKB	12. COUNTY OR PARISE 13. STATE San Juan NM
TEST WATER PUT OF P FRACTURE TEAL SHOOT OR ACIDIZE CHANGE PLANS (Other) (NOTE: Report results)	BEPAIRING WELL ALTERING CASING ABANDONMENT* S of multiple completion on Well eletion Report and Log form.) Including estimated date of starting any all depths for all markers and gones perti-
Plugged well as follows: 1. Set Class "B" Cement plug with 2% CaCl ₂ from 2. Ran Cement Bond Log from 602' to 350'. 3. Set Class "B" Cement plug from 602 to 400' in casing. 4. Set cement retainer at 290'. 5. Squeeze 29.5 ft ³ Class "B" Cement below retain casing hole at 332'. 6. Set Class "B" Cement plug from 290' to 163' if 7. Pump 68 ft ³ Class "B" Cement down 4½" casing we return to bradenhead through hole at 163'. and bradenhead area full of cement. 8. Cut off well head and install dry hole marker 9. Job complete 5-31-91.	side of 4½" ner and into nside 4½" casing. with cement Left 4½" casing
Approved so to plugging of the well here.	

Approved by the programs of the west been Lieblity under bond to release the entities bursely work.

	Part the way of the control of the transfer of the state	
18. I bereby certify that the foregripe is from	ue and correct	
SIGNED John Alexander	wolv TITLE Operations Manager	ратв <u>6-3-91</u>
(This space for Federal or State office u		
APPROVED BY		DITE DISTRIBUTE
	*See Instructions on Reverse Side	FARMINGTON RESOURCE AREA
CONDITIONS OF APPROVAL, IF ANY		