

5 BLM 1 File

Form 3160-5  
(June 1990)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT -" for such proposals.

**SUBMIT IN TRIPLICATE**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Designation and Serial No. <b>NM12374</b>
2. Name of Operator <b>Dugan Production Corp.</b>		6. If Indian, Allotted or Tribe Name
3. Address and Telephone No. <b>P.O. Box 420, Farmington, NM 87499 (505) 325 - 1821</b>		7. If Unit or CA, Agreement Designation
Location of Well (Footage, Sec., T., R., M., or Survey Description) <b>810' FEL &amp; 1680' FSL Sec. 27, T24N, R9W, NMPM</b>		8. Well Name and No. <b>November 24 #1</b>
		9. API Well No. <b>30 045 25295</b>
		10. Field and Pool, or Exploratory Area <b>Bisti Lower Gallup Ext.</b>
		11. County or Parish, State <b>San Juan, NM</b>

**12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION	
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other <u>Return to Production</u>	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)

This well needs the rod pump changed. The well will be returned to production as soon as a rig is available, but no later than 7/1/2004.

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

Signed

*John Alexander*  
John Alexander

Vice President

Date

3/23/2004

(This space for Federal or State office use)

Original Signed: Stephen Mason

MAR 26 2004

Approved by \_\_\_\_\_ Title \_\_\_\_\_

Date \_\_\_\_\_

Conditions of approval, if any: