

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED

JAN 30 2013

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

SUNDRY NOTICES AND REPORTS ON WELLS Farmington Field Office

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 type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other COAL BED METHANE	5. Lease Designation and Serial No. NM 29560
2. Name of Operator Dugan Production Corp.	6. If Indian, Allotted or Tribe Name
3. Address and Telephone No. P.O. Box 420, Farmington, NM 87499 (505) 325 - 1821	7. If Unit or CA, Agreement Designation NM112659
Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 2 T23N R8W NESW 1750' FSL 1650' FWL	8. Well Name and No. JEFFERS FEDERAL 2-23 9. API Well No. 30-045-24439 10. Field and Pool, or Exploratory Area BASIN FRUITLAND COAL 11. County or Parish, State SAN JUAN COUNTY, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment <input type="checkbox"/> Change of Plans
<input checked="" 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>Production Start Up</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.)*

Well placed in production on 01/23/2013 @ 12:00pm

Tubing Pressure: 35

Casing Pressure: 36

Initial MCF: 8

Sales Meter #: 31685

Gas Transporter: ELMRIDGE

RCVD FEB 1 '13
OIL CONS. DIV.
DIST. 3

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

Signed Staci E. Brooks Title Prod Acct Supervisor Date 1/29/2013

(This space for Federal or State office use)

ACCEPTED FOR RECORD

Approved by _____ Title _____ Date 1/29/2013

Conditions of approval, if any:

FARMINGTON FIELD OFFICE

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse

NMOCDCa