

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

5. Lease Designation and Serial No
NM-2337

6. If Indian, Allotted or Tribe Name

1. Type of Well

Oil Well Gas Well Other

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7. If Unit or CA, Agreement Designation

2. Name of Operator

Dugan Production Corp.

**Bureau of Land Management
Farmington Field Office**

8. Well Name and No.

Chaco #90

3. Address and Telephone No.

P.O. Box 420, Farmington, NM 87499 (505) 325 - 1821

9. API Well No

30 045 32273

Location of Well (Footage, Sec., T., R., M., or Survey Description)

**1850' FNL & 1850' FWL, Unit F
SE/4 NW/4, Sec. 6, T24N, R8W**

10. Field and Pool, or Exploratory Area

Basin Fruitland Coal

11. County or Parish, State

San Juan, 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 checked="" type="checkbox"/>	Subsequent Report	<input type="checkbox"/>	Recompletion
<input type="checkbox"/>	Final Abandonment Notice	<input type="checkbox"/>	Plugging Back
		<input type="checkbox"/>	Casing Repair
		<input type="checkbox"/>	Altering Casing
		<input checked="" type="checkbox"/>	Other <u>Production test</u>
		<input type="checkbox"/>	Change of Plans
		<input type="checkbox"/>	New Construction
		<input type="checkbox"/>	Non-Routine Fracturing
		<input type="checkbox"/>	Water Shut-Off
		<input type="checkbox"/>	Conversion to Injection
		<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.)

Reporting production test information:

4 MCFD. 32 BWPD. 0 BOPD.

RCVD DEC 14 '07

OIL CONS. DIV.

DIST. 3

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

Signed

John Alexander
John Alexander

Vice-President

Date

12/7/2007

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any.

RECEIVED FOR RECORD

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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 Side
NMOCD

FARMINGTON FIELD OFFICE
Sum