

6 BLM 1 Navajo Allotted 1 File
UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

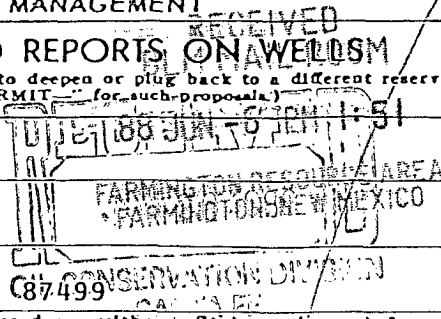
SUBMIT IN TRIPPLICATE*
(Other instructions on re-verse side)

Form approved:
Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON A WELL

(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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR DUGAN PRODUCTION CORP.		8. FARM OR LEASE NAME Marathon	
3. ADDRESS OF OPERATOR P.O. Box 208, Farmington, NM 87499		9. WELL NO. 2	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1830' FNL & 1830' FEL		10. FIELD AND POOL, OR WILDCAT South Bisti Gallup	
14. PERMIT NO.		15. ELEVATIONS (Show whether of, RT, OR, etc.) 6625' GL; 6637' KB	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 4, T23N, R10W, NMP	
		12. COUNTY OR PARISH San Juan	
		13. STATE NM	



16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Spud & Surface Casing <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

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.)*

Moved in & rigged up Four Corners Drilling Company rig #5. Spudded a 12 1/4" hole @ 5:00 PM 5-31-88. Drilled to 220'. Ran 5 jts. 9-5/8" OD, 36#, 8 Rd, LT&C casing (T.E. 197.70') set @ 210' RKB. Cemented with 125 sx class "B" plus 2% CaCl₂. (Total cement slurry = 147.5 cu.ft.). P.O.B. @ 9:00 PM 5-31-88. (Circulated 2 bbls cement to surface).

Pressure tested surface casing & BOP 600 psi for 30 minutes while W.O.C. before drilling out - held OK.

RECEIVED
JUN 1 6 1988
OIL CON. DIV.
DIST. 3

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

SIGNED Jim L. Jacobs TITLE Geologist DATE 6-2-88

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE JUN 13 1988

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA

BY [Signature]

NMCCA