

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 type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		<b>RECEIVED</b>  <b>JAN 21 2011</b> <b>Farmington Field Office</b> <b>Bureau of Land Management</b>	5. Lease Designation and Serial No. <b>NM 33021</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>660' FSL &amp; 1050' FEL Unit P, Sec. 28, T27N, R12W</b>			8. Well Name and No. <b>Coaly 3</b>
			9. API Well No. <b>30 045 35012</b>
			10. Field and Pool, or Exploratory Area <b>Fruitland Coal</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 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 Start Up</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.)\*

Well placed in production on 01/18/2011

Tubing Pressure: 28

Casing Pressure: 26

Initial MCF: 0

Sales Meter #: 88741

Gas Transporter: Enterprise

**RCVD JAN 25 '11**

**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 01/20/2011

(This space for Federal or State office use)

**ACCEPTED FOR RECORD**

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date JAN 21 2011

Conditions of approval, if any:

**FARMINGTON FIELD OFFICE**  
BY [Signature]

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**