	Submit Copy To Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505		Form C-103 October 13, 2009	
	District I 1625 N. French Dr., Hobbs, NM 88240			WELL API NO. 30-045-35013	
	District II 1301 W. Grand Ave., Artesia, NM 88210 District III			5. Indicate Type of Lease	
	1000 Rio Brazos Rd., Aztec, NM 87410 District IV			STATE FEE XX 6. State Oil & Gas Lease No.	
	1220 S. St. Francis Dr., Santa Fe, NM 87505				
	SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			7. Lease Name or Unit Agreement Na Federal I Com	me
	1. Type of Well: Oil Well Gas Well X Other			8. Well Number 102S	
	2. Name of Operator Dugan Production Corp.			9. OGRID Number 006515	
	3. Address of Operator P. O. Box 420, Farmington, NM 87499-0420			10. Pool name or Wildcat Harper Hill Fruitland San Basin Fruitland Coal	d / PC
	Unit Letter I: 2365 feet from the South line and 1220 feet from the East line				
	Section 12 Township 29N Range 14W NMPM County San Juan				
	11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5401 GR				
	12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
3	NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
	PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORTEMPORARILY ABANDON CHANGE PLANS COMMENCE DR				; [] []
	PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB DOWNHOLE COMMINGLE				
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	OTHER: Production Start Up 13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date				
	of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.				
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	Well Placed in production on 02/01/2011 @ 9:30am RCVD FEB 8'11				
				OIL CONS. DIV.	
				ore doller bit.	
				DIST. 3	
				243(, <u>(</u>	
	Spud Date:	Rig Release D	Pate:		
	I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
	SIGNATURE John D. Roe TITLE Engineering Manager DATE 02/07/11				
	Type or print name For State Use Only	E-mail addres	johnroe@dug s:	Anproduction.com PHONE: (505) 32	25–1821
	APPROVED BY: District #3				11
	Conditions of Approval (if any):				
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