

N

30-045-26929

5-27-88

F. Loc. 810/S; 1830/E Elev. 6615 GL Spd. _____ Comp. _____ TD _____ PB _____
 Cu. ft. _____ Cu. ft. _____
 Casing S. _____ @ _____ W _____ Sx. Int. _____ @ _____ W _____ Sx. Pr. _____ @ _____ W _____ Sx. T. _____ @ _____
 Csg. Perf. _____ Prod. Stim. _____

T
R
A
N
S

BO/D _____ Grav. _____ 1st Del. Gas _____
 MCF/D After _____ Hrs. SICP _____ PSI After _____ Days GOR _____ 1st Del. Oil _____

TOPS		NIID X	Well Log	TEST DATA						
Ojo Alamo		C - 103	Plat X	Schd.	PC	Q	PW	PD	D	Ref.No.
Kirtland		C - 104	Electric Log							
Fruitland			C - 122							
Pictured Cliffs		Ditr	Dfa							
Chacra		Datr	Dac							
Cliff House										
Menefee										
Point Lookout										
Mancos										
Gallup										
Greenhorn										
Dakota										
Entrada										
		Acres W/80								

P
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IS. Bisti Gal Co. SJ S 4 T 23N R 10W U O Oper. Dugan Production Corp Lse. Lake Placid No. 2

Lake Placid #2

O-4-23N-10W

DUGAN PRODUCTION CORP.

JUN. 13 1990

N00-C-14-20-7311 (PD)
3162.3-1.0 (019)

CERTIFIED MAIL
P 565 392 521

RECEIVED

JUN 15 1990

OIL CON. DIV.
DIST. 3

Dugan Production Company
P. O. Box 420
Farmington, NM 87499

Gentlemen:

Enclosed is your Application for Permit to Drill (APD) well No. 2 Lake Placid, SW/4SE/4, sec. 4, T. 23 N., R. 10 W., San Juan County, New Mexico, lease N00-C-14-20-7311. As discussed with Barbra Williams of your company on May 24, 1990, the subject APD is rescinded and returned due to drilling not being commenced within second year of approval date.

You are required to request surface rehabilitation instructions from this office if construction activities occurred on the referenced drill site. If this office does not receive comment within 30 days, we will presume that no construction occurred and proceed accordingly. Later discovery that construction activities have in fact occurred, may result in assessment of liquidated damages.

Sincerely,

Ken Townsend

FOR John L. Keller, Chief
Branch of Mineral Resources

Enclosure

cc: New Mexico Oil Conservation Division, 1000 Rio Brazos Rd., Aztec, NM
87410

Well file
3162.3-1.0
ADO - 015
Suspense - FSM
Carto
Adjudication
019:SMason:sjl:6-8-90

ABANDONED LOCATION

1 Celsius - Denver 1 Celsius-SLC
7 BLM UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

2 Navajo Allotted
SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

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

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—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NOO-C-14-20-7311
2. NAME OF OPERATOR DUGAN PRODUCTION CORP.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo Allottee
3. ADDRESS OF OPERATOR P.O. Box 420, Farmington, NM 87499		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 810' FSL & 1830' FEL		8. FARM OR LEASE NAME Lake Placid
14. PERMIT NO.		9. WELL NO. 2
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6615' GL; 6627' KB		10. FIELD AND POOL, OR WILDCAT South Bisti Gallup
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 4, T23N, R10W, NMPM
		12. COUNTY OR PARISH San Juan
		13. STATE NM

18. 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) <input type="checkbox"/>	(Other) <input type="checkbox"/>
(Other) Extend APD <input checked="" type="checkbox"/>		(Note: Report results of multiple completion on Well Completion or Recorecompletion 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.)*

Request permission to extend APD expiration date six months to November 25, 1989.

Additional time required for detailed geologic evaluation.

RECEIVED
MAY 10 1989
OIL CON. DIV.
DALLAS

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

SIGNED

Sherman E. Dugan

TITLE

Vice-President

DATE

5-4-89

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side