

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.

30-039-26372

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

V-4645 & B-11240

7. Lease Name or Unit Agreement Name

Mighty Com

8. Well No.

90

9. Pool name or Wildcat

Basin Fruitland Coal

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.)

1. Type of Well:

OIL
WELL ☐

GAS
WELL ☒

OTHER

2. Name of Operator

Dugan Production Corp.

3. Address of Operator

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

4. Well Location

Unit Letter L : 2275 Feet From The South Line and 790 Feet From The West Line

Section 32

Township 24N

Range 7W

NMPM

Rio Arriba

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

7083'

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: Report of Production Casing ☒

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Drill 6- $\frac{1}{4}$ " hole to T.D. 2262'. Run 4 $\frac{1}{2}$ " 10.5 lb. casing. Land @ 2255'.
Cement with 406 cu. ft. 2% Lodense containing $\frac{1}{4}$ # celloflake/sx, tail
with 89 cu ft. class "B" containing $\frac{1}{4}$ # celloflake/sx. Circulate 15 bbls
cement to surface. Job complete 1500 hrs. 4/11/2000.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

John Alexander

John Alexander

TITLE

Vice-President

DATE

4/12/2000

TELEPHONE NO.

TYPE OR PRINT NAME

(This space for State Use)

ORIGINAL SIGNED BY ON PAGE 1 OF 2

DEPUTY OIL & GAS INSPECTOR

APR 13 2000

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY: