

Dec. 1973

5 BLM, Fmn

1 File

Form Approved.
Budget Bureau No. 42-R1424

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☐ well ☐ gas well ☒ other ☐
2. NAME OF OPERATOR
Dugan Production Corp.
3. ADDRESS OF OPERATOR
P.O. Box 208, Farmington, NM 87499
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1120' FNL - 1120' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

- TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐

SUBSEQUENT REPORT OF:

- ☐
☐
☐
☐
☐
☐
☐
☐

(other) Extension of APD

5. LEASE

NM 26047

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Bowers

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

Potwin Pictured Cliffs EIT

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 17, T24N, R8W, N14PM

12. COUNTY OR PARISH 13. STATE

San Juan NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

6890' GL; RKB = GL

RECEIVED

APR 18 1984

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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APR 24 1984
BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

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 extension of APD due to our drilling schedule.
Expect to spud about 9-1-84.

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MAY 8 1984

OIL CON. DIV
DIST. ?

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Jim L. Jacobs TITLE Geologist DATE 4-16-84

Michael F. Reitz (This space for Federal or State office use)

APPROVED BY _____ TITLE District Manager DATE MAY 01 1984

CONDITIONS OF APPROVAL, IF ANY: This approval expires October 26, 1984. Drilling operations must be commenced by that date.

*See Instructions on Reverse Side

NMOCC