

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   
Gallup Dakota

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: 790' FNL - 1120' FWL  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

- TEST WATER SHUT-OFF
- FRACTURE TREAT
- SHOOT OR ACIDIZE
- REPAIR WELL
- PULL OR ALTER CASING
- MULTIPLE COMPLETE
- CHANGE ZONES
- ABANDON\*
- (other) Intention to test additional zone

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

MAY 02 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.)\*

Upon evaluating open holes logs, the Dakota development is poorer than anticipated. Upon testing the Dakota, we plan to perforate, stimulate and test the Gallup interval, approximately 4490 to 5090'. Request for approval of unorthodox location submitted to NMOCD. Should potential be indicated in both zones, we plan to request authorization from NMOCD for downhole commingling.

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OIL CON. DIV.  
DIST. 3

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 \_\_\_\_\_

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

oh 2

NMOCD

\*See Instructions on Reverse Side

5. LEASE  
NM 51000

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Fabulous Feb

9. WELL NO.  
1

10. FIELD OR WILDCAT NAME  
Basin Dakota & Bisti Lower Gallup

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 31, T24N, R9W, NMPM

12. COUNTY OR PARISH | 13. STATE  
San Juan | NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
6855' GL; 6867' RKB

APPROVED  
5-1-84

MAY 07 1984

John M. McKee  
AREA MANAGER  
FARMINGTON RESOURCE AREA

OIL CONSERVATION DIVISION

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-102  
Revised 10-1-78

All distances must be from the outer boundaries of the Section.

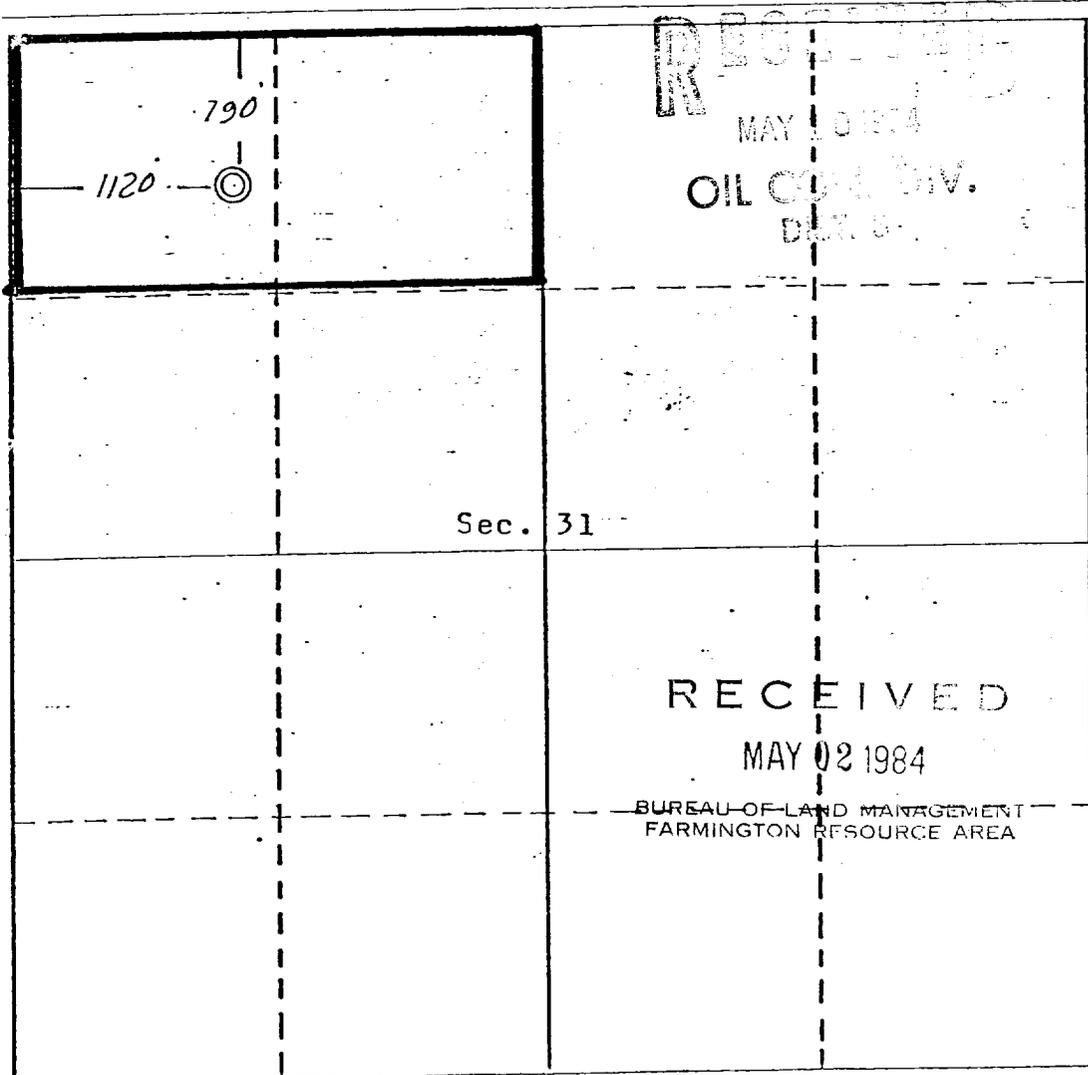
Operator <b>Dugan Production Corporation</b>		Lease <b>Fabulous Feb</b>		Well No. <b>1</b>
Unit Letter <b>D</b>	Section <b>31</b>	Township <b>24 North</b>	Range <b>9 West</b>	County <b>San Juan</b>
Actual Footage Location of Well: <b>790</b> feet from the <b>North</b> line and <b>1120</b> feet from the <b>West</b> line				
Ground Level Elev. <b>6855</b>	Producing Formation <b>Gallup</b>	Pool <b>Bisti Lower Gallup</b>	Dedicated Acreage: <b>80.0</b> / <b>80.34</b> Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

Yes  No If answer is "yes," type of consolidation \_\_\_\_\_

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) \_\_\_\_\_

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Division.



**CERTIFICATION**

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

*Jim L. Jacobs*  
Name  
**Jim L. Jacobs**  
Position  
**Geologist**  
Company  
**Dugan Production Corp.**  
Date  
**4-18-84**

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FARMINGTON RESOURCE AREA

I hereby certify that the location shown on this plat was taken from field notes of actual surveys made by me or under my supervision and that the same is true and correct to the best of my knowledge.

**EDGAR L. RISENHOVER**  
REGISTERED LAND SURVEYOR  
NEW MEXICO  
5979

Date Surveyed  
**February 6, 1984**  
Registered Professional Engineer and/or Land Surveyor  
*Edgar L. Risenhoover*  
Certificate No. **5979**  
**Edgar L. Risenhoover, L.S.**