

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.B.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State ☒ Fee ☐
5. State Oil & Gas Lease No.
V-1509

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. 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
UNIT LETTER G 1980 FEET FROM THE North LINE AND 1980 FEET FROM
THE East LINE, SECTION 32 TOWNSHIP 24 RANGE 10 NMPM.
5. Elevation (Show whether DF, RT, GR, etc.)
6580' GL; 6592' RKB
6. County
San Juan

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐ OTHER ☐ CASING TEST AND CEMENT JOB ☐
OTHER ☐ Spud & surface casing ☒
Pressure Test ☐

17. 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.

M.I. & R.U. Four Corners Drilling Rig #3. Spudded 12 1/2" hole at 7:00 PM 9-28-85. Drilled to 225'. Ran 7 jts. 8-5/8" OD, 24#, J-55, 8Rd ST&C casing (T.E. 204') set at 217' RKB. Cemented with 135 sacks class "B" plus 2% CaCl₂ (total cement slurry 159 cf). Circulated approx. 1 1/2 bbls cement. P.O.B. at 11:30 PM 9-28-85. (Pressure tested BOP & surface casing 600 psi for 30 minutes before drilling out - held OK.)

RECEIVED
OCT 01 1985
OIL CON. DIV.
DIST. 3

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.
SIGNED Jim L. Jacobs TITLE Geologist DATE 9-30-85
Original Signed by FRANK T. CHAVEZ TITLE DIST. 3 DATE OCT 01 1985
CONDITIONS OF APPROVAL, IF ANY: