

5 BLM 1 File
UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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.)

RECEIVED

DEC 26 1985

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM 22044	
2. NAME OF OPERATOR DUGAN PRODUCTION CORP.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P O Box 208, 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 1980' FSL - 1980' FWL		8. FARM OR LEASE NAME Gold Medal	
14. PERMIT NO.		9. WELL NO. 2	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6640' GL; 6652' RKB		10. FIELD AND POOL, OR WILDCAT * South Bisti-Gallup	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 33, T24N, R10W, NMPM	
		12. COUNTY OR PARISH San Juan	13. STATE NM

16. **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) <u>Change of Acreage Dedication</u> <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(Note: Report results of multiple completion on Well Completion or Recompletion 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.)*

Attached is NMOC form C-102, reflecting a change of acreage dedication for the subject well resulting from the establishment of special pool rules for the South Bisti-Gallup Oil Pool (NMOC Order No. R-8090, dated December 4, 1985).

*Denotes change from Undesignated Gallup Oil Pool

18. I hereby certify that the foregoing is true and correct		ACCEPTED FOR RECORD	
SIGNED <u>Jim L. Jacobs</u>	TITLE <u>Geologist</u>	DATE <u>12-24-85</u>	
(This space for Federal or State office use)		JAN 15 1986	
APPROVED BY _____	TITLE _____	DATE _____	
CONDITIONS OF APPROVAL, IF ANY:		FARMINGTON RESOURCE AREA	

*See Instructions on Reverse Side

NMOC

OIL CONSERVATION DIVISION

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENTP. O. BOX 2088
SANTA FE, NEW MEXICO 87501Form C-102
Revised 10-1-78

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

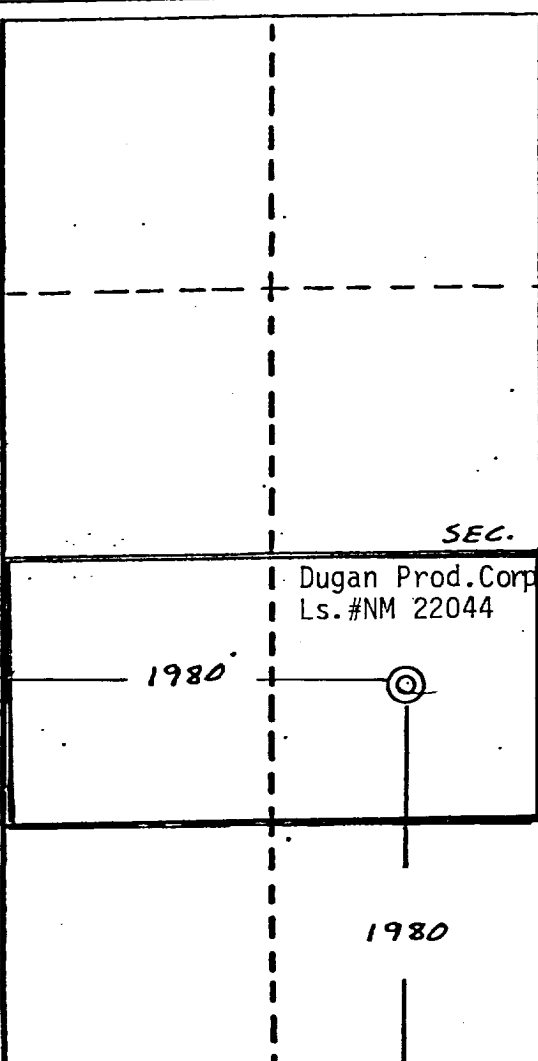
Operator Dugan Production Corporation		Lease Gold Medal		Well No. 2
Unit Letter K	Section 33	Township 24 North	Range 10 West	County San Juan
Actual Footage Location of Wells 1980 feet from the South line and 1980 feet from the West line				
Ground Level Elev. 6640	Producing Formation Gallup	Pool South Bisti-Gallup	Dedicated Acreage: 80 Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure 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.

		RECEIVED DEC 26 1985 BUREAU OF LAND MANAGEMENT FARMINGTON RESOURCE AREA	
Dugan Prod. Corp. Ls. #NM 22044			
1980			
1980			

CERTIFICATION

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

Name
Jim L. Jacobs

Position
Geologist

Company
Dugan Production Corp.

Date
12-24-85

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 are true and correct to the best of my knowledge.

Date Surveyed
July 30, 1985

Registered Professional Engineer
and/or Land Surveyor

Cert. # 5979

Edgar L. Risenbauer