

Form 3160-5  
(June 1990)UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

## SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

## SUBMIT IN TRIPLICATE

## 1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

## 2. Name of Operator

Dugan Production Corp.

## 3. Address and Telephone No.

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

## 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

800' FSL - 1700' FWL

N Sec. 1, T24N, R11W, NMPM

## FORM APPROVED

Budget Bureau No. 1004-0135  
Expires: March 31, 1993

## 5. Lease Designation and Serial No.

NM 39017

## 6. If Indian, Allottee or Tribe Name

## 7. If Unit or CA, Agreement Designation

## 8. Well Name and No.

Sesame Street 1

## 9. API Well No.

30-045-28227

## 10. Field and Pool, or Exploratory Area

Basin Fruitland Coal

## 11. County or Parish, State

San Juan, NM

## 12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

## TYPE OF SUBMISSION

☒ Notice of Intent☐ Subsequent Report☐ Final Abandonment Notice

## TYPE OF ACTION

☒ Abandonment☐ Recompletion☐ Plugging Back☐ Casing Repair☐ Altering Casing☐ Other☐ Change of Plans☐ New Construction☐ Non-Routine Fracturing☐ Water Shut-Off☐ Conversion to Injection☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

## 13. 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.)\*

It is intended to plug &amp; abandon this well by filling the casing full by pumping a displacement plug followed by 80 sks class "B" with 4% gel cement. A dry hole marker will be installed.

RECEIVED  
OCT 11 1996  
OIL CON. DIV.  
DIST. 3OIL CON. DIV.  
OCT 27 PM 4:28  
RECEIVED

## 14. I hereby certify that the foregoing is true and correct

Signed

Title Operations Manager

Date 9/27/96

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any:

NMOC

APP VED

OCT 7 1996