

Form 3160-5  
(June 1990)UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

## 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<br><input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other | 5. Lease Designation and Serial No.<br>NM-17781           |
| 2. Name of Operator<br>DUGAN PRODUCTION CORP.  | 6. If Indian, Allottee or Tribe Name                      |
| 3. Address and Telephone No.<br>P.O. Box 420, Farmington, NM 87499   | 7. If Unit or CA, Agreement Designation                   |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)<br>1450' FNL & 1450' FEL<br>Sec. 22, T26N, R13W, NMPM     | 8. Well Name and No.<br>Paul Revere #93                   |
|  | 9. API Well No.<br>30-045-28341                           |
|  | 10. Field and Pool, or Exploratory Area<br>WAW FR Sand PC |
|  | 11. County or Parish, State<br>San Juan, NM               |

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

| TYPE OF SUBMISSION                                   | TYPE OF ACTION  |
|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Abandonment                        |
| <input type="checkbox"/> Subsequent Report           | <input type="checkbox"/> Recompletion                       |
| <input type="checkbox"/> Final Abandonment Notice    | <input type="checkbox"/> Plugging Back                      |
|  | <input type="checkbox"/> Casing Repair                      |
|  | <input type="checkbox"/> Altering Casing                    |
|  | <input checked="" type="checkbox"/> Other <u>Extend APD</u> |
|  | <input type="checkbox"/> Change of Plans                    |
|  | <input type="checkbox"/> New Construction                   |
|  | <input type="checkbox"/> Non-Routine Fracturing             |
|  | <input type="checkbox"/> Water Shut-Off                     |
|  | <input type="checkbox"/> Conversion to Injection            |
|  | <input type="checkbox"/> 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.)\*

Request a 6 month extension of time on approved APD.

RECEIVED  
BLM  
91 OCT 11 PM 12:41  
OIL FIELD DIVISION, N.M.THIS APPROVAL EXPIRES APR 12 1992

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

Signed Sherman E. Dugan  
(This space for Federal or State office use)Title Vice-PresidentApproved by \_\_\_\_\_  
Conditions of approval, if any: \_\_\_\_\_

Title \_\_\_\_\_

APPROVED

OCT 11 1991  
AREA MANAGER

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

\*See Instruction on Reverse Side