

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SF 079115

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Tonkin

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

West Kutz - P.C.

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 13, T27N, R12W

12. COUNTY OR PARISH

San Juan

13. STATE

NM

1.

OIL ☐ WELL GAS ☒ WELL OTHER

2. NAME OF OPERATOR

Dugan Production Corp.

3. ADDRESS OF OPERATOR

Box 234, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

990' FNL -- 1650' FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6049' DF

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

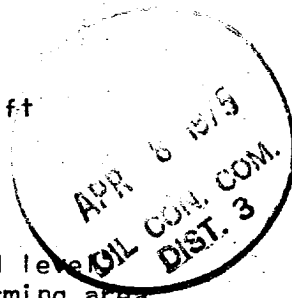
SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☒(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.)*

This well was plugged and abandoned in the following manner:

1. Spotted 25 cu ft cement plug 1610-1790'
2. Shot off casing at 487', pulled casing and spotted 25 cu ft cement plug 537-437'
3. Spotted 10 sx cement plug in bottom of surface pipe
4. Placed 2 sx cement in top of surface pipe 4' below ground level (This well is in the Navajo Indian Irrigation Project farming area so no dry hole marker was erected.)



APR 7 1975

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

SIGNED

Jim L. Jacobs

TITLE Geologist

DATE 3-31-75

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side