5-USGS (Farmington) 1-File	
Form 9-331 UNITED STATES SUBMIT IN TRIPLICATE (Other Instructions on report of the INTERIOR of	5. LEASE DESIGNATION AND SERIAL NO.
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
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.)	Navajo
1. OIL GAS X OTHER	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR	8. FARM OR LEASE NAME
Dugan Production Corp. 3. ADDRESS OF OPERATOR	Pet Inc.
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Box 234, Farmington, NM 87401 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*	10. FIELD AND POOL, OR WILDCAT
See also space 17 below.) At surface	Ojo Pictured Cliffs
1850' FSL - 790' FEL	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
	A TON B I L L A
14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)	Sec 35, T28N, R15W 12. COUNTY OR PARISH 13. STATE
5641' GR	San Juan NM
16. Check Appropriate Box To Indicate Nature of Notice, Report, or	
NOTICE OF INTENTION TO:	EQUENT REPORT OF
TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT MULTIPLE COMPLETE FRACTURE TREATMENT ARANDON* SHOOTING OR ACIDIZING	ABANDONMENT*
CHANGE PLANS (Other)	Running Tubing X
(Other) (Note: Report resu	lts of multiple completion on Well mpletion Report and Log form.)
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dat proposed work. If well is directionally drilled, give subsurface locations and measured and true ver nent to this work.) *	tical depths for all markers and zones perti-
7-16-77 Moved in and rigged up Farmington Well Service. Moved in and rigged up Farmington Well Service. Moved in and rigged up Farmington Well Service.	TE 598.76' set @ valve. Well making
	genth and motor below the control of
18. I hereby certly that the foregoing is true and correct	JUL 29 1977
SIGNED TITLE Geologist	DATE
Jim L. Jacobs (This space for Federal or State office use)	
	DATE
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:	DATE