

dugan production corp.

OIL CONSERVATION DIVISION
RECEIVED

94 JAN 11 AM 8 07

January 6, 1994

Mr. Michael E. Stogner
New Mexico Oil Conservation Division
P.O. Box 2088
Santa Fe, NM 87504-2088

**Re: Application for Administrative Approval of
Unorthodox Location for Dugan Production Corp's Okie #1
1105' FSL & 840' FEL, Sec. 8, T24N, R8W, NMPM
San Juan County, New Mexico
Basin Fruitland Coal**

Dear Mr. Stogner:

We hereby request approval for an unorthodox location for the subject well. Copies of the well location plat, topographic map, a production map and a map showing offsetting operators are attached for your reference.

The unorthodox location is necessary in order to salvage the wellbore of an unsuccessful Pictured Cliffs test. Originally, the Okie #1 was drilled to test the Pictured Cliffs Sandstone. The test was unsuccessful, the zone will be abandoned and a completion in the Fruitland Coal will be undertaken.

A copy of this application is being submitted to all offsetting operators by certified mail with a request that they furnish your office with a waiver of objection.

We request your approval of this location under the provisions of NMOCD Order No. R-8768, Rule #8.

Sincerely,

Jim L. Jacobs
Vice-President

KF/cg

attachs.

cc: Mr. Ernie Busch, NMOCD Aztec
Offsetting Operators
BLM, Farmington

**NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACERAGE DEDICATION PLAT**

1105
840 E
6917

All distances must be from the outer boundaries of the Section

Operator OKLAHOMA OIL COMPANY			Lease FRENCH WASH		Well No. 1
Unit Letter P	Section 8	Township 24 NORTH	Range 8 WEST	County SAN JUAN	
Actual Footage Location of Well: 1105 feet from the SOUTH line and 840 feet from the EAST line					
Ground Level Elev. 6917	Producing Formation Pictured Cliff		Pool Wildcat	Dedicated Acreage: 160 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 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 Commission.

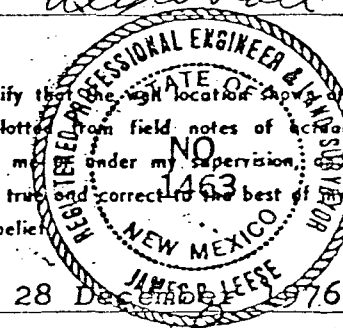
CERTIFICATION

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

John Alexander
Name
Agent
Position
Oklahoma Oil Company
Company
12-30-76
Date

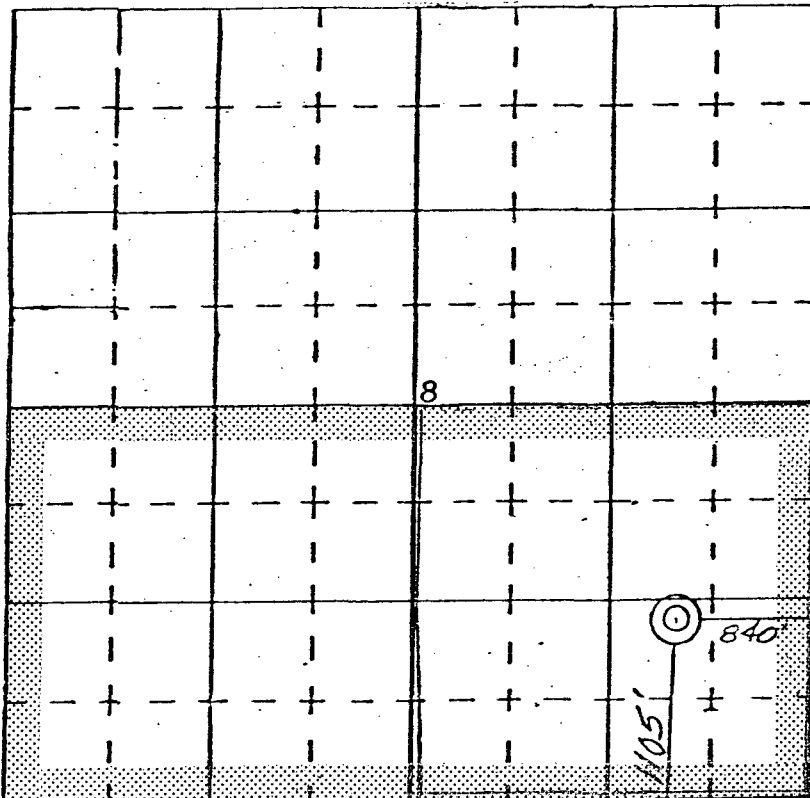
John Alexander

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, that the same is true and correct to the best of my knowledge and belief.



28 December 1976
Date Surveyed
James P. Leese
Registered Professional Engineer
and/or Land Surveyor

1463
Certificate No.



N

R8W

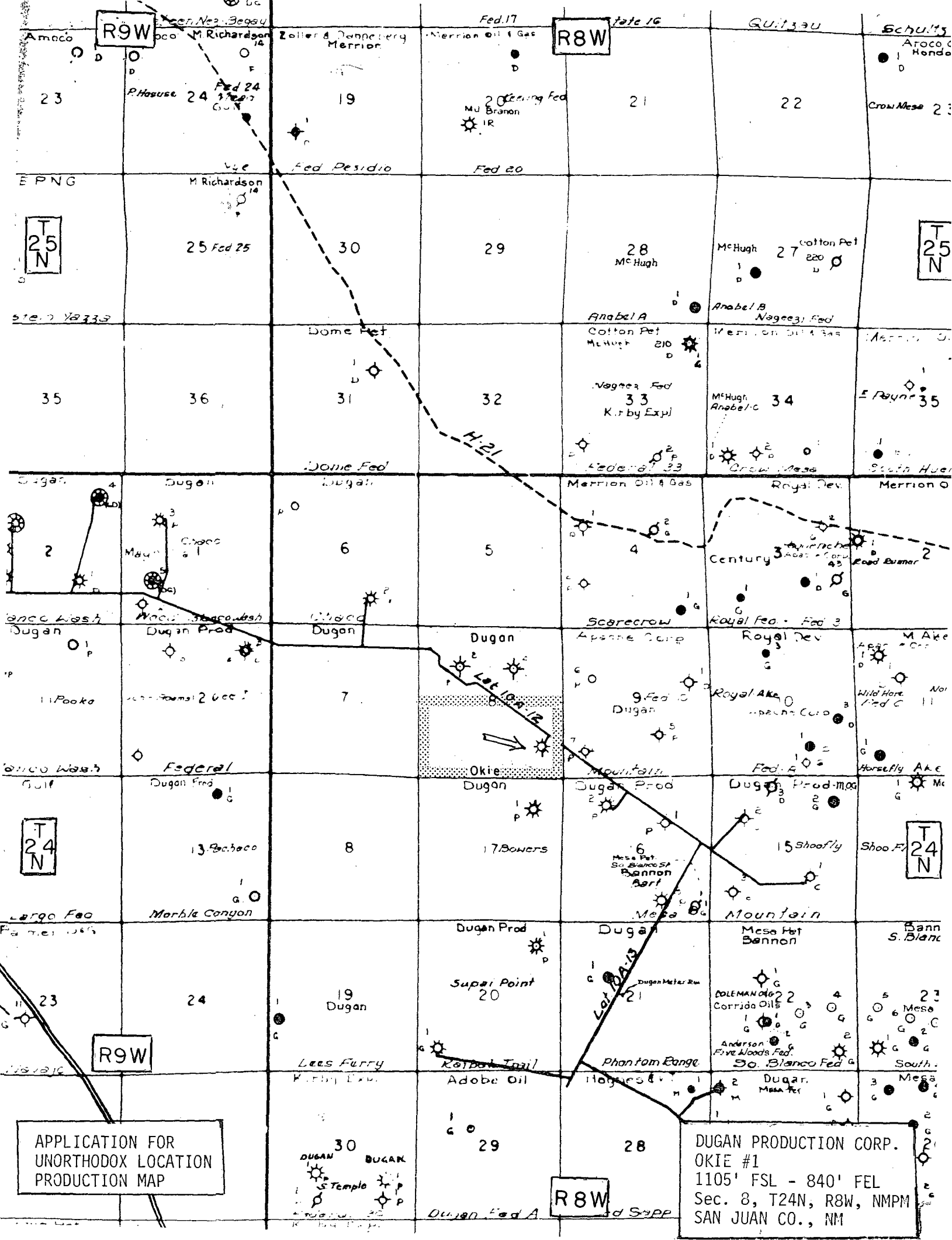
T
24
N

Okie #1

*Standard
to 4 Quarter
Section*

APPLICATION FOR
UNORTHODOX LOCATION
TOPOGRAPHIC MAP

DUGAN PRODUCTION CORP.
OKIE #1
1105' FSL - 840' FEL
Sec. 8, T24N, R8W, NMPM
SAN JUAN CO., NM



	NM-2337 Dugan	Morgan-Richard	Yates etal.	Federal (Open)	Merrion
6		Giant Exp.	5		4
R.K. Lewis -Fee					
			NM-19567 Dugan	Celsius Ener.	Yates etal.
T 24 N	7		8		9
			Okie ☼		NM-16789 Dugan
Navajo Allotted (Open)	NM-85307 Dugan		NM-26047 Dugan		LG-1917 Dugan
18			17		16
			R8W	Mesa Petr.	

APPLICATION FOR
UNORTHODOX LOCATION
OFFSETTING OPERATORS

DUGAN PRODUCTION CORP.
OKIE #1
1105' FSL - 840' FEL
Sec. 8, T24N, R8W, NMPM
SAN JUAN CO., NM



dugan production corp.

'94 MAR 1 AM 8 39

--Certified Mail--

January 6, 1994

NSL-3344

SIGN & RETURN
THIS COPY

Celsius Energy
P.O. Box 11070
Salt Lake City, UT 84147

**Re: Application for Administrative Approval of
Unorthodox Location for Dugan Production Corp's Okie #1
1105' FSL & 840' FEL, Sec. 8, T24N, R8W, NMPM
San Juan County, NM**

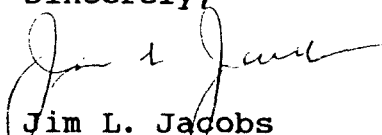
Gentlemen:

A copy of Dugan Production's Application for Administrative Approval of the unorthodox location for the subject well has been enclosed for your review.

If you do not have any objection to this unorthodox location, please sign all four copies of this waiver. Please send one executed copy each to the New Mexico Oil Conservation Division in Aztec and Santa Fe, NM and one executed copy to our office. Self-addressed, stamped envelopes are enclosed. The remaining copy is for your records.

Thank you for your assistance and cooperation in this matter.

Sincerely,


Jim L. Jacobs
Vice-President

KF/cg

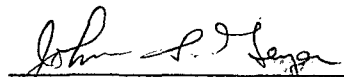
encs.

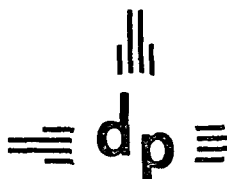
=====

WAIVER

Celsius Energy hereby waives objection to the above referenced application for unorthodox location for Dugan Production Corp's Okie #1 Well.

2/24/94
Date


By:



dugan production corp.

OIL CONSERVATION DIVISION
RECEIVED

--Certified Mail--

January 6, 1994 3 AM 8 39

USL-3344

SIGN & RETURN
THIS COPY

Celsius Energy
P.O. Box 11070
Salt Lake City, UT 84147

**Re: Application for Administrative Approval of
Unorthodox Location for Dugan Production Corp's Okie #1
1105' FSL & 840' FEL, Sec. 8, T24N, R8W, NMPM
San Juan County, NM**

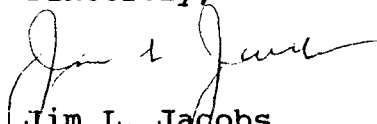
Gentlemen:

A copy of Dugan Production's Application for Administrative Approval of the unorthodox location for the subject well has been enclosed for your review.

If you do not have any objection to this unorthodox location, please sign all four copies of this waiver. Please send one executed copy each to the New Mexico Oil Conservation Division in Aztec and Santa Fe, NM and one executed copy to our office. Self-addressed, stamped envelopes are enclosed. The remaining copy is for your records.

Thank you for your assistance and cooperation in this matter.

Sincerely,


Jim L. Jacobs
Vice-President

KF/cg

encs.

RECEIVED

FEB 28 1994

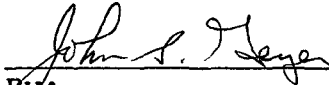
OIL CON. DIV.
DIST. 3

=====

WAIVER

Celsius Energy hereby waives objection to the above referenced application for unorthodox location for Dugan Production Corp's Okie #1 Well.

2/24/94
Date


By:

Form 3160-5
(June 1989)

RECEIVED
DIVISION

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

92 DEC 29 AM 9 16

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)

1105' FSL & 840' FEL
Sec. 8, T24N, R8W, NMPM

5. Lease Designation and Serial No.

NM 19867

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Okie #1

9. API Well No.

30-045-22307

10. Field and Pool, or Exploratory Area

Potwin PC

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	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" 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>Well Test</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.)

The subject well was tested through the sales meter for October, 1992. The integrated volume for the month is 44 MCF. Of this volume, 27 MCF was produced from the Bowers No.1 (common meter with Okie 1) on the first day of testing. This leaves 17 MCF being produced from the Okie No.1 for this month. This volume is a paying quantity.

This well will be left on production.

DEC 29 1992

DEC 29 1992

DEC 29 1992

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

Signed

John C. [Signature]

Title

Operations Manager

Date

11/13/92

(This space for Federal or State Office use)

Approved by

Conditions of approval, if any:

Title

ACCEPTED FOR RECORD

DEC 02 1992

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

BY

1000 NM 101

RECEIVED

'92 OCT 13 PM 4:13

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED
BLM

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

5. Lease Designation and Serial No.
NM 19567

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Okie #1

9. API Well No.

30-045-22307

10. Field and Pool, or Exploratory Area

Potwin PC

11. County or Parish, State

San Juan, NM

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)

1105' FSL & 840' FEL
Sec. 8, T24N, R8W, NMPM

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 Test Well

- ☐ 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.)*

RECEIVED

OCT 01 1992

OIL CON. DIV
DIST. 3

Swab to establish production. Possibly acidize and test again.

THIS APPROVAL EXPIRES OCT 09 1992

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

Signed John Alexander
(This space for Federal or State office use)

Title Operations Manager

Date 9/23/92

Approved by _____
Conditions of approval, if any:

Title _____

APPROVED

SEP 28 1992

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 (and its agencies) false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side

NIACCO

4-NMOC

1-File 1-El Paso

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501Form C-104
Revised 10-01-78
Format 06-01-83
Page 1REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator DUGAN PRODUCTION CORP.	
Address P.O. Box 208, Farmington, NM 87499	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate
This is a Central Point Delivery.	

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Okie	Well No. 1	Pool Name, Including Formation Potwin - PC	Kind of Lease State, Federal or Fee Fed.	Lease No. NM 19567
Location Unit Letter <u>P</u> ; <u>1105</u> Feet From The <u>South</u> Line and <u>840</u> Feet From The <u>East</u> Line of Section <u>8</u> Township <u>24N</u> Range <u>8W</u> , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Dugan Production Corp.	P.O. Box 208, Farmington, NM 87499
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
	Yes

If this production is commingled with that from any other lease or pool, give commingling order number: _____

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Jim L. Jacobs (Signature)
Geologist (Title)

11-25-86 (Date)

OIL CONSERVATION DIVISION

APPROVED _____

BY _____

TITLE _____

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

EL PASO NATURAL GAS COMPANY
POST OFFICE BOX 990
FARMINGTON, NEW MEXICO

NOTICE OF GAS CONNECTION

DATE September 9, 1982

THIS IS TO NOTIFY THE OIL CONSERVATION COMMISSION THAT CONNECTION FOR PURCHASE OF

GAS FROM Dugan Production Corp.
OperatorOkie #1

Well Name

94-450-01

Meter Code

24694-01

Site Code

P

Well Unit

8-24-8

S-T-R

Potwin Pictured Cliffs

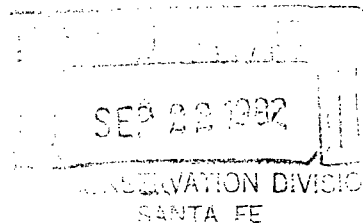
Pool

El Paso Natural Gas Company

Name of Purchaser

WAS MADE ON August 30, 1982,
DateFIRST DELIVERY August 30, 1982
DateAOF ----CHOKE 43El Paso Natural Gas Company
PurchaserM. H. Miteburn
RepresentativeChief Division Dispatcher
Title

cc: Operator Farmington
Oil Conservation Commission - 2
~~Production~~ El Paso Production Control
Contract Administration
File



4 NMOCD

1 EPNG

1 File

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-1
Effective 1-1-65

Operator DUGAN PRODUCTION CORP.	
Address P O Box 208, Farmington, NM 87401	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/> **	Change in Transporter of: SANTA FE
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

Other (Please explain)
**This was completed in 1977 and has been waiting on pipeline.

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Okie	Well No. 1	Pool Name, Including Formation Potwin - PC	Kind of Lease State, Federal or Fee Fed	Lease No. NM 19567
Location Unit Letter P, 1105 Feet From The South Line and 840 Feet From The East				
Line of Section 8 Township 24N Range 8W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Co.	P O Box 990, Farmington, NM 87401	
If well produces oil or liquids, give location of tanks.	Unit	Sec. Twp. Rge.
		Is gas actually connected? When

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		XX	XX					
Date Spudded 1-14-77	Date Compl. Ready to Prod. 2-7-77		Total Depth 2160'		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) 6917' GL	Name of Producing Formation Pictured Cliffs		Top Oil/Gas Pay 2045		Tubing Depth 2071'			
Perforations 2045-52					Depth Casing Shoe 2154'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		93'		65			
8"	4-1/2"		2154'		135 sx			
	2 3/8		2071					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D 43	Length of Test 3 hrs	Bbls. Condensate/MMCF ---	Gravity of Condensate ---
Testing Method (pilot, back pr.) back pressure	Tubing Pressure (shut-in) ---	Casing Pressure (shut-in) 544 SI	Choke Size ---

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Thomas A. Dugan

Thomas A. Dugan (Signature)
Petroleum Engineer

8-17-82

(Date)

OIL CONSERVATION COMMISSION

APPROVED *ADD 19 NOV*, 19
BY *3-27-82*
TITLE

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviator tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

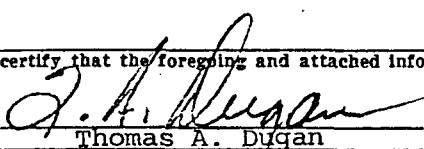
Fill out only Sections I, II, III, and VI for changes of owner well name or number, or transporter, or other such change of condition

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL:		OIL WELL <input type="checkbox"/>	GAS WELL <input checked="" type="checkbox"/>	DRY <input type="checkbox"/>	Other <input type="checkbox"/>		
b. TYPE OF COMPLETION:		NEW WELL <input checked="" type="checkbox"/>	WORK OVER <input type="checkbox"/>	DEEP-EN <input type="checkbox"/>	PLUG BACK <input type="checkbox"/>	DIFF. RESVR. <input type="checkbox"/>	Other <input type="checkbox"/>
2. NAME OF OPERATOR Dugan Production Corp.						5. LEASE DESIGNATION AND SERIAL NO. NM-19567	
3. ADDRESS OF OPERATOR Box 234, Farmington, NM 87401						6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements): At surface 1105' FSL - 840' FEL At top prod. interval reported below At total depth						7. UNIT AGREEMENT NAME	
14. PERMIT NO. DATE ISSUED						8. FARM OR LEASE NAME Okie	
15. DATE SPUNDED 1-14-77 16. DATE T.D. REACHED 1-23-77 17. DATE COMPL. (Ready to prod.) 2-7-77 18. ELEVATIONS (DF, RES, BT, GR, ETC.)* 6917' GR 19. ELEV. CASING HEAD						9. WELL NO. #1	
20. TOTAL DEPTH, MD & TVD 2160' 21. PLUG, BACK T.D., MD & TVD 22. IF MULTIPLE COMPL. HOW MANY* Single - Gas 23. INTERVALS DRILLED BY 0-2160' 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Pictured Cliffs 2045-52 25. WAS DIRECTIONAL SURVEY MADE						10. FIELD AND POOL, OR WILDCAT Potwin - PC	
26. TYPE ELECTRIC AND OTHER LOGS RUN FDC/CNL IES Cement Bond GR/CCL						11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec 8 T24N R8W	
27. WAS WELL CORED						12. COUNTY OR PARISH San Juan	
28. CASING RECORD (Report all strings set in well)						13. STATE NM	
CASINO SIZE		WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED	
8-5/8"	20#	93'	12-1/4	65 SX			
4-1/2"	9.5#	2154'	8	135 SX			
29. LINER RECORD						30. TUBING RECORD	
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2-3/8	2071	
31. PERFORATION RECORD (Interval, size and number) 2045-52						32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. DEPTH INTERVAL (MD) AMOUNT AND KIND OF MATERIAL USED: See Sundry Notice 3-17-77 for detailed info	
33. PRODUCTION						WELL STATUS (Producing or shut-in) SI	
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Swabbing				GAS-OIL RATIO	
4-4-78		3 hrs		---		43	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		OIL GRAVITY-API (CORR.)	
---		544 SI		---		---	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)						TEST WITNESSED BY Dugan	
35. LIST OF ATTACHMENTS						36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records	
SIGNED  Thomas A. Dugan						TITLE Petroleum Engineer	
						DATE 6-19-78	

* (See Instructions and Spaces for Additional Data on Reverse Side)

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, and/or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.); formations, etc.; and all other pertinent data, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval/zone (multiple completion), so state in Item 22, and in Item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in Item 83. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

100

[illegible][illegible]

STIMULATED BY DODGE'S ZONES.

38. GEOLOGIC MARKERS
SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP

MEAS. DEPTH		TRUE VERT. DEPTH	
1	10	10	10
2	20	20	20
3	30	30	30
4	40	40	40
5	50	50	50
6	60	60	60
7	70	70	70
8	80	80	80
9	90	90	90
10	100	100	100
11	110	110	110
12	120	120	120
13	130	130	130
14	140	140	140
15	150	150	150
16	160	160	160
17	170	170	170
18	180	180	180
19	190	190	190
20	200	200	200
21	210	210	210
22	220	220	220
23	230	230	230
24	240	240	240
25	250	250	250
26	260	260	260
27	270	270	270
28	280	280	280
29	290	290	290
30	300	300	300
31	310	310	310
32	320	320	320
33	330	330	330
34	340	340	340
35	350	350	350
36	360	360	360
37	370	370	370
38	380	380	380
39	390	390	390
40	400	400	400
41	410	410	410
42	420	420	420
43	430	430	430
44	440	440	440
45	450	450	450
46	460	460	460
47	470	470	470
48	480	480	480
49	490	490	490
50	500	500	500
51	510	510	510
52	520	520	520
53	530	530	530
54	540	540	540
55	550	550	550
56	560	560	560
57	570	570	570
58	580	580	580
59	590	590	590
60	600	600	600
61	610	610	610
62	620	620	620
63	630	630	630
64	640	640	640
65	650	650	650
66	660	660	660
67	670	670	670
68	680	680	680
69	690	690	690
70	700	700	700
71	710	710	710
72	720	720	720
73	730	730	730
74	740	740	740
75	750	750	750
76	760	760	760
77	770	770	770
78	780	780	780
79	790	790	790
80	800	800	800
81	810	810	810
82	820	820	820
83	830	830	830
84	840	840	840
85	850	850	850
86	860	860	860
87	870	870	870
88	880	880	880
89	890	890	890
90	900	900	900
91	910	910	910
92	920	920	920
93	930	930	930
94	940	940	940
95	950	950	950
96	960	960	960
97	970	970	970
9			

1. NAME
 2. ADDRESS
 3. CITY
 4. STATE
 5. ZIP
 6. PHONE
 7. DATE
 8. TIME
 9. BY
 10. INITIALS
 11. SIGNATURE
 12. DATE
 13. TIME
 14. BY
 15. INITIALS
 16. SIGNATURE
 17. DATE
 18. TIME
 19. BY
 20. INITIALS
 21. SIGNATURE
 22. DATE
 23. TIME
 24. BY
 25. INITIALS
 26. SIGNATURE
 27. DATE
 28. TIME
 29. BY
 30. INITIALS
 31. SIGNATURE
 32. DATE
 33. TIME
 34. BY
 35. INITIALS
 36. SIGNATURE
 37. DATE
 38. TIME
 39. BY
 40. INITIALS
 41. SIGNATURE
 42. DATE
 43. TIME
 44. BY
 45. INITIALS
 46. SIGNATURE
 47. DATE
 48. TIME
 49. BY
 50. INITIALS
 51. SIGNATURE
 52. DATE
 53. TIME
 54. BY
 55. INITIALS
 56. SIGNATURE
 57. DATE
 58. TIME
 59. BY
 60. INITIALS
 61. SIGNATURE
 62. DATE
 63. TIME
 64. BY
 65. INITIALS
 66. SIGNATURE
 67. DATE
 68. TIME
 69. BY
 70. INITIALS
 71. SIGNATURE
 72. DATE
 73. TIME
 74. BY
 75. INITIALS
 76. SIGNATURE
 77. DATE
 78. TIME
 79. BY
 80. INITIALS
 81. SIGNATURE
 82. DATE
 83. TIME
 84. BY
 85. INITIALS
 86. SIGNATURE
 87. DATE
 88. TIME
 89. BY
 90. INITIALS
 91. SIGNATURE
 92. DATE
 93. TIME
 94. BY
 95. INITIALS
 96. SIGNATURE
 97. DATE
 98. TIME
 99. BY
 100. INITIALS
 101. SIGNATURE
 102. DATE
 103. TIME
 104. BY
 105. INITIALS
 106. SIGNATURE
 107. DATE
 108. TIME
 109. BY
 110. INITIALS
 111. SIGNATURE
 112. DATE
 113. TIME
 114. BY
 115. INITIALS
 116. SIGNATURE
 117. DATE
 118. TIME
 119. BY
 120. INITIALS
 121. SIGNATURE
 122. DATE
 123. TIME
 124. BY
 125. INITIALS
 126. SIGNATURE
 127. DATE
 128. TIME
 129. BY
 130. INITIALS
 131. SIGNATURE
 132. DATE
 133. TIME
 134. BY
 135. INITIALS
 136. SIGNATURE
 137. DATE
 138. TIME
 139. BY
 140. INITIALS
 141. SIGNATURE
 142. DATE
 143. TIME
 144. BY
 145. INITIALS
 146. SIGNATURE
 147. DATE
 148. TIME
 149. BY
 150. INITIALS
 151. SIGNATURE
 152. DATE
 153. TIME
 154. BY
 155. INITIALS
 156. SIGNATURE
 157. DATE
 158. TIME
 159. BY
 160. INITIALS
 161. SIGNATURE
 162. DATE
 163. TIME
 164. BY
 165. INITIALS
 166. SIGNATURE
 167. DATE
 168. TIME
 169. BY
 170. INITIALS
 171. SIGNATURE
 172. DATE
 173. TIME
 174. BY
 175. INITIALS
 176. SIGNATURE
 177. DATE
 178. TIME
 179. BY
 180. INITIALS
 181. SIGNATURE
 182. DATE
 183. TIME
 184. BY
 185. INITIALS
 186. SIGNATURE
 187. DATE
 188. TIME
 189. BY
 190. INITIALS
 191. SIGNATURE
 192. DATE
 193. TIME
 194. BY
 195. INITIALS
 196. SIGNATURE
 197. DATE
 198. TIME
 199. BY
 200. INITIALS
 201. SIGNATURE
 202. DATE
 203. TIME
 204. BY
 205. INITIALS
 206. SIGNATURE
 207. DATE
 208. TIME
 209. BY
 210. INITIALS
 211. SIGNATURE
 212. DATE
 213. TIME
 214. BY
 215. INITIALS
 216. SIGNATURE
 217. DATE
 218. TIME
 219. BY
 220. INITIALS
 221. SIGNATURE
 222. DATE
 223. TIME
 224. BY
 225. INITIALS
 226. SIGNATURE
 227. DATE
 228. TIME
 229. BY
 230. INITIALS
 231. SIGNATURE
 232. DATE
 233. TIME
 234. BY
 235. INITIALS
 236. SIGNATURE
 237. DATE
 238. TIME
 239. BY
 240. INITIALS
 241. SIGNATURE
 242. DATE
 243. TIME
 244. BY
 245. INITIALS
 246. SIGNATURE
 247. DATE
 248. TIME
 249. BY
 250. INITIALS
 251. SIGNATURE
 252. DATE
 253. TIME
 254.

we did not receive the logs from Oklahoma Oil

[illegible][illegible][illegible][illegible][illegible]

230
 100
 90
 80
 70
 60
 50
 40
 30
 20
 10
 0
 100
 200
 300
 400
 500
 600
 700
 800
 900
 1000
 1100
 1200
 1300
 1400
 1500
 1600
 1700
 1800
 1900
 2000
 2100
 2200
 2300
 2400
 2500
 2600
 2700
 2800
 2900
 3000
 3100
 3200
 3300
 3400
 3500
 3600
 3700
 3800
 3900
 4000
 4100
 4200
 4300
 4400
 4500
 4600
 4700
 4800
 4900
 5000
 5100
 5200
 5300
 5400
 5500
 5600
 5700
 5800
 5900
 6000
 6100
 6200
 6300
 6400
 6500
 6600
 6700
 6800
 6900
 7000
 7100
 7200
 7300
 7400
 7500
 7600
 7700
 7800
 7900
 8000
 8100
 8200
 8300
 8400
 8500
 8600
 8700
 8800
 8900
 9000
 9100
 9200
 9300
 9400
 9500
 9600
 9700
 9800
 9900
 10000

[illegible][illegible][illegible]

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60
61
62
63
64
65
66
67
68
69
70
71
72
73
74
75
76
77
78
79
80
81
82
83
84
85
86
87
88
89
90
91
92
93
94
95
96
97
98
99
100
101
102
103
104
105
106
107
108
109
110
111
112
113
114
115
116
117
118
119
120
121
122
123
124
125
126
127
128
129
130
131
132
133
134
135
136
137
138
139
140
141
142
143
144
145
146
147
148
149
150
151
152
153
154
155
156
157
158
159
160
161
162
163
164
165
166
167
168
169
170
171
172
173
174
175
176
177
178
179
180
181
182
183
184
185
186
187
188
189
190
191
192
193
194
195
196
197
198
199
200
201
202
203
204
205
206
207
208
209
210
211
212
213
214
215
216
217
218
219
220
221
222
223
224
225
226
227
228
229
230
231
232
233
234
235
236
237
238
239
240
241
242
243
244
245
246
247
248
249
250
251
252
253
254
255
256
257
258
259
260
261
262
263
264
265
266
267
268
269
270
271
272
273
274
275
276
277
278
279
280
281
282
283
284
285
286
287
288
289
290
291
292
293
294
295
296
297
298
299
300
301
302
303
304
305
306
307
308
309
310
311
312
313
314
315
316
317
318
319
320
321
322
323
324
325
326
327
328
329
330
331
332
333
334
335
336
337
338
339
340
341
342
343
344
345
346
347
348
349
350
351
352
353
354
355
356
357
358
359
360
361
362
363
364
365
366
367
368
369
370
371
372
373
374
375
376
377
378
379
380
381
382
383
384
385
386
387
388
389
390
391
392
393
394
395
396
397
398
399
400
401
402
403
404
405
406
407
408
409
410
411
412
413
414
415
416
417
418
419
420
421
422
423
424
425
426
427
428
429
430
431
432
433
434
435
436
437
438
439
440
441
442
443
444
445
446
447
448
449
450
451
452
453
454
455
456
457
458
459
460
461
462
463
464
465
466
467
468
469
470
471
472
473
474
475
476
477
478
479
480
481
482
483
484
485
486
487
488
489
490
491
492
493
494
495
496
497
498
499
500
501
502
503
504
505
506
507
508
509
510
511
512
513
514
515
516
517
518
519
520
521
522
523
524
525
526
527
528
529
530
531
532
533
534
535
536
537
538
539
540
541
542
543
544
545
546
547
548
549
550
551
552
553
554
555
556
557
558
559
560
561
562
563
564
565
566
567
568
569
570
571
572
573
574
575
576
577
578
579
580
581
582
583
584
585
586
587
588
589
590
591
592
593
594
595
596
597
598
599
600
601
602
603
604
605
606
607
608
609
610
611
612
613
614
615
616
617
618
619
620
621
622
623
624
625
626
627
628
629
630
631
632
633
634
635
636
637
638
639
640
641
642
643
644
645
646
647
648
649
650
651
652
653
654
655
656
657
658
659
660
661
662
663
664
665
666
667
668
669
670
671
672
673
674
675
676
677
678
679
680
681
682
683
684
685
686
687
688
689
690
691
692
693
694
695
696
697
698
699
700
701
702
703
704
705
706
707
708
709
710
711
712
713
714
715
716
717
718
719
720
721
722
723
724
725
726
727
728
729
730
731
732
733
734
735
736
737
738
739
740
741
742
743
744
745
746
747
748
749
750
751
752
753
754
755
756
757
758
759
760
761
762
763
764
765
766
767
768
769
770
771
772
773
774
775
776
777
778
779
780
781
782
783
784
785
786
787
788
789
790
791
792
793
794
795
796
797
798
799
800
801
802
803
804
805
806
807
808
809
810
811
812
813
814
815
816
817
818
819
820
821
822
823
824
825
826
827
828
829
830
831
832
833
834
835
836
837
838
839
840
84

[illegible][illegible]

U.S. GOVERNMENT PRINTING OFFICE: 1963-O-683636

080 97-497

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on reverse side)Form approved.
Budget Bureau No. 42-R-424.

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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. NM-19567
2. NAME OF OPERATOR Dugan Production Corp.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Box 234, Farmington, NM 87401		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 X 1105' FSL - 840' FEL		8. FARM OR LEASE NAME Okie
14. PERMIT NO.		9. WELL NO. #1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6917' GR		10. FIELD AND POOL, OR WILDCAT Wildcat
		11. SEC. T. R., M., OR BLK. AND SURVEY OR AREA Sec 8 T24N R8W
		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) <input 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 and 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.)*

CHANGE OF OWNERSHIP

Effective February 27, 1978

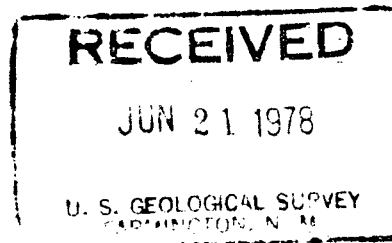
From: Oklahoma Oil Co. TO: Dugan Production Corp.

CHANGE OF WELL NAME

Effective February 27, 1978

From: French Wash #1

To: Okie #1



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

SIGNED Thomas A. Dugan TITLE Petroleum EngineerDATE 6-19-78

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY: _____

*See Instructions on Reverse Side

May 1967

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

Form No. 100-10
Budget Bureau No. 42-R1424

5. LEASE DESIGNATION AND SERIAL NO.

NM-19567

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.)

1.

OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Oklahoma Oil Company

3. ADDRESS OF OPERATOR

Suite 11s0, One Energy Square, Dallas, Texas 75206

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

1105' FSL & 840' FEL

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

French Wash

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Potwin P.C.

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

Sec 8, T24N, R8W

14. PERMIT NO.

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

6917 GL

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐
☐
☐
☐
☐

PULL OR ALTER CASING

☐
☐
☐
☐
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☒
☐

REPAIRING WELL

☐
☐
☐
☐
☐

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

(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.)*

Moved in completion rig. Ran GR-CCL and cement bond logs. Perforate Pictured Cliff 2045-52. Ran 2 3/8 tubing to 2071 feet. Spotted 250 gallon 15% BDA acid and broke down perforations at 1200 psi. Pull tubing to 1979 feet and land in tubing head. Fractured down tubing and casing with 70/30 quality foam, 16,000 gallons foam with 14,000# 20-40 sand. Average injection rate 15 barrels per minute. Average pressure 1800 psi, instant shut in pressure 1325 psi. After N₂ recovered, gas rate too small to measure. Lower tubing to 2070 feet. Swab small amount of foam fluid. Gas rate too small to measure. Shut in for build up.

MAY 18 1977

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

SIGNED

John Alexander
John Alexander
(This space for Federal or State office use)

TITLE

Agent

DATE

3-17-77

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-19567

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

French Wash

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat

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

Sec 8, T24N, R8W

12. COUNTY OR PARISH 13. STATE

San Juan

New Mexico

1.

OIL ☐ GAS ☒
WELL WELL OTHER

2. NAME OF OPERATOR

Oklahoma Oil Company

3. ADDRESS OF OPERATOR

Suite 1120, One Energy Square, Dallas, Texas 75206

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

840' FEL & 1105' FSL

14. PERMIT NO.

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

6917 GL

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 ☐

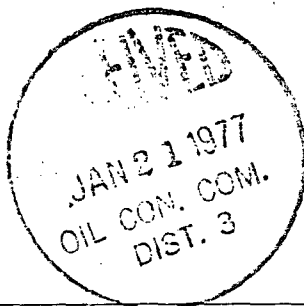
ALTERING CASING ☐

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.)*

Moved in and rigged up rotary tools. Drilled 12 1/4" hole to 100 feet. Ran 91 feet of 8 5/8 20# casing set at 93 feet. Cemented with 65 sacks class "B" + 2% CaCl₂. Circulated 19 sacks cement. Plug down 1500 hours 1-15-77. Wait on cement 12 hours. Will drill out with 6 1/4 bit.



JAN 20 1977

U. S. GEOLOGICAL SURVEY

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

SIGNED

John Alexander

TITLE

Agent

DATE

1-19-77

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☒DEEPEN ☐PLUG BACK ☐

b. TYPE OF WELL

OIL
WELL ☐GAS
WELL ☒

OTHER

SINGLE
ZONE ☒MULTIPLE
ZONE ☐

2. NAME OF OPERATOR

Oklahoma Oil Company

3. ADDRESS OF OPERATOR

Suite 1120, One Energy Square, Dallas, Texas 75206

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)*

At surface
840' FEL & 1105' FSL

At proposed prod. zone

Same

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

6 miles southeast of Blanco Trading Post

15. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST
PROPERTY OR LEASE LINE, FT.
(Also to nearest drlg. unit line, if any)

840

16. NO. OF ACRES IN LEASE

1240

17. NO. OF ACRES ASSIGNED
TO THIS WELL

160

18. DISTANCE FROM PROPOSED LOCATION*
TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

19. PROPOSED DEPTH

2100

20. ROTARY OR CABLE TOOLS

Rotary

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

6917

22. APPROX. DATE WORK WILL START*

1-5-77

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
12 1/4	8 5/8	20#	45'	35 sacks class "B" + 2% CaCl ₂
6 1/4	4 1/2	10.5#	2100'	100 sacks 65-35 class "B" Poz + 12 % gel
				150 sacks class "B" + 2% CaCl ₂

Move in - rig up rotary tools. Drill 12 1/4 hole to 45 feet. Set 45 feet of new 8 5/8" 20# casing and cement as indicated above. Wait on cement 12 hours. Install 6" 900 series blow out preventer and test. Drill 6 1/4 hole to 2100 feet. No abnormal temperature or pressure is expected. Well will be drilled with a gel-chem mud to total depth with mud characteristics of 9.0-9.2# per gallon, WL 8-10 cc and 30-40 viscosity. Open hole logs to be run as follows: DIL, FDC-CNL and GR-Caliper. If commercial, 4 1/2 casing will be run and cemented as indicated above. If non-commercial, well will be plugged and abandoned as per U.S.G.S. instructions.

GAS NOT DEDICATED

RECEIVED

DEC 30 1976

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone, and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and proposed true vertical depths. Give blowout preventer program, if any.

24.

SIGNED

John Alexander
(This space for Federal or State office use)

TITLE Agent

DATE

12-30-76

PERMIT NO.

APPROVAL DATE

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

NEW MEXICO OIL CONSERVATION COMMISSION WELL LOCATION AND ACERAGE DEDICATION PLAT

1105-5
840 E #1
6917

All distances must be from the outer boundaries of the Section

Operator OKLAHOMA OIL COMPANY			Lease FRENCH WASH		Well No. 1
Unit Letter P	Section 8	Township 24 NORTH	Range 8 WEST	County SAN JUAN	
Actual Footage Location of Well: <div style="display: flex; justify-content: space-between;"> 1105 feet from the SOUTH line and 840 feet from the EAST line </div>					
Ground Level Elev. 6917	Producing Formation Picturec Cliff	Pool Wildcat	Dedicated Avereage: 160 Acres		

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

CERTIFICATION

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

John Alexander
Name

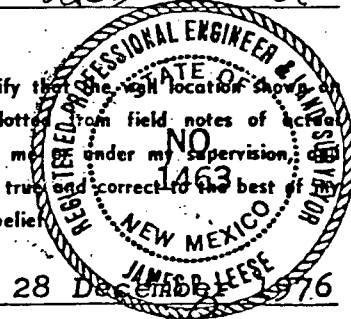
Agent
Position

Oklahoma Oil Company
Company

12-30-76
Date

John Alexander

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, that the same is true and correct to the best of my knowledge and belief.

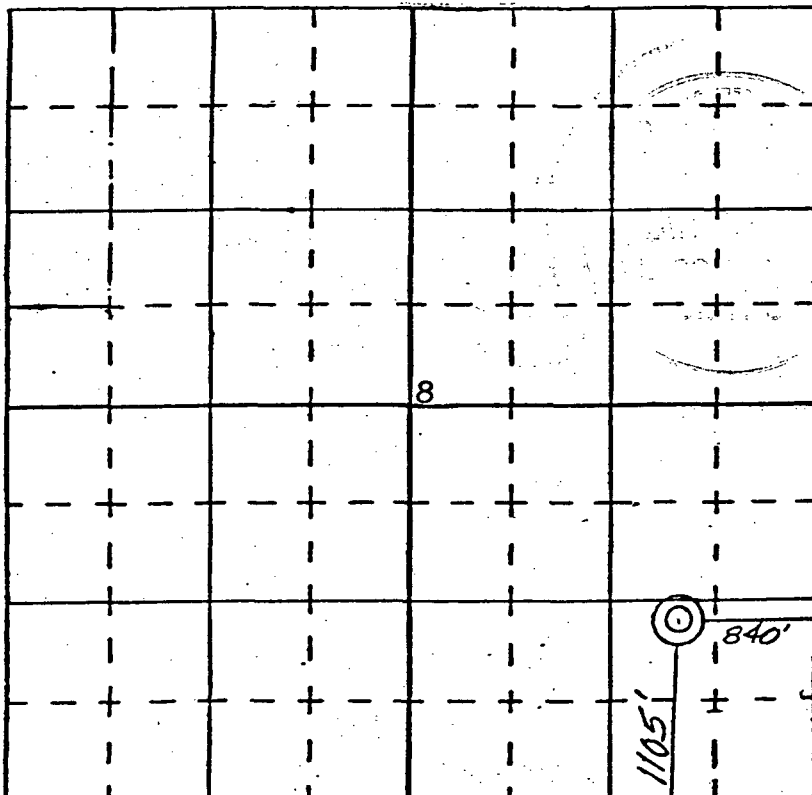


28 Dec 1976
Date Surveyed

James P. Leese
Registered Professional Engineer
and/or Land Surveyor

1463

Certificate No.





STATE OF NEW MEXICO
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT
OIL CONSERVATION DIVISION



BRUCE KING
GOVERNOR

ANITA LOCKWOOD
CABINET SECRETARY

POST OFFICE BOX 2088
STATE LAND OFFICE BUILDING
SANTA FE, NEW MEXICO 87504
(505) 827-5800

January 12, 1994

Dugan Production Corporation
P.O. Box 420
Farmington, NM 87499-0420

Attention: Jim L. Jacobs, Vice President

RE: Application for Administrative Approval of an unorthodox coal gas well location for Okie Well No. 1. 1105' FSL - 840' FEL (Unit P) of Section 8, Township 24 North, Range 8 West, NMPM, San Juan County, New Mexico.

Dear Mr. Jacobs:

To complete the subject application please provide us a copy of the letter of notice to all offset operators contacted and a copy of the return receipt cards.

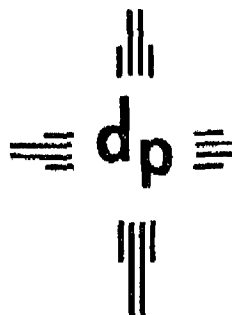
This information should be adequate to complete the subject filing. Should you have any questions, please contact me.

Sincerely,

Michael E. Stogner
Chief Hearing Officer/Engineer

MES/amg

cc: Oil Conservation Division - Aztec
US Bureau of Land Management - Farmington



dugan production corp.

FAX TRANSMITTAL

DATE: 1/21/94 TIME: 11:20TO: Anna GriegoCOMPANY: New Mexico Oil Conservation Div. - Santa Fe

DEPARTMENT: _____

FAX NO. 505-827-5741 TELEPHONE NO. _____

You should receive 2 pages including this cover sheet. If you did not receive all pages or you are unable to read any pages, please contact:

FROM: Cheri Gunn TELEPHONE NO. 505/325-1821, ext. 29

Per our phone conversation this morning, attached please find return receipt card from Celsius Energy (offset operator). This should complete our application for administrative approval of unorthodox location for:

Dugan Production Corp's Okie #1
Basin Fruitland Coal
1105' FSL & 840' FEL
Unit P, Sec. 8, T24N, R8W
San Juan County, NM

UNITED STATES POSTAL SERVICE

Official Business

1994

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE \$300

Print your name, address and ZIP Code here

Dugan Production Corp.
P.O. Box 420
Farmington, NM 87499-0420

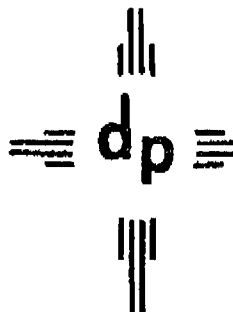
Attn:

SENDER: OK, E, #1 • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so that we can return this card to you. • Attach this form to the front of the mailpiece, or on the back if space does not permit. • Write "Return Receipt Requested" on the mailpiece below the article number. • The Return Receipt will show to whom the article was delivered and the date delivered.		I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
		3. Article Addressed to: Celsius Energy P.O. Box 11070 Salt Lake City, UT 84147	
4a. Article Number P 157 111 468		4b. Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input checked="" type="checkbox"/> Return Receipt for Merchandise	
5. Signature (Addressee) 		7. Date of Delivery JAN 10	
6. Signature (Agent) 		8. Addressee's Address (Only if requested and fee is paid)	

PS Form 3811, December 1991 ☆ U.S.G.P.O. : 1992-307-530

DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.



dugan production corp.

FAX TRANSMITTAL

DATE: 1/20/94 TIME: 11:20TO: Anna GriegoCOMPANY: New Mexico Oil Conservation Div. - Santa Fe

DEPARTMENT: _____

FAX NO. 505-827-5741 TELEPHONE NO. _____

You should receive 2 pages including this cover sheet. If you did not receive all pages or you are unable to read any pages, please contact:

FROM: Cheri Gunn TELEPHONE NO. 505/325-1821, ext. 29

Per our phone conversation this morning,
attached please find return receipt card from Celsius Energy (offset operator).
This should complete our application for administrative approval of unorthodox
location for:

Dugan Production Corp's Okie #1
Basin Fruitland Coal
1105' FSL & 840' FEL
Unit P, Sec. 8, T24N, R8W
San Juan County, NM

UNITED STATES POSTAL SERVICE

Official Business


 PENALTY FOR PRIVATE
 USE TO AVOID PAYMENT
 OF POSTAGE \$300


Print your name, address and ZIP Code here

 Dugan Production Corp.
 P.O. Box 420
 Farmington, NM 87499-0420

Alt:

SENDER: OK, E #1 • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so that we can return this card to you. • Attach this form to the front of the mailpiece, or on the back if space does not permit. • Write "Return Receipt Requested" on the mailpiece below the article number. • The Return Receipt will show to whom the article was delivered and the date delivered.		I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
3. Article Addressed to: Celsius Energy P.O. Box 11070 Salt Lake City, UT 84147		4a. Article Number P 157 111 458	
		4b. Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input checked="" type="checkbox"/> Return Receipt for Merchandise	
		7. Date of Delivery JAN 10	
5. Signature (Addressee)		8. Addressee's Address (Only if requested and fee is paid)	
6. Signature (Agent)			

PS Form 3811, December 1991 ☆ U.S.G.P.O. : 1992-307-530

DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

CELSIUS ENERGY COMPANY

1331 17th Street
Suite 800
Denver, CO 80202
(303) 296-8945

Fax # (303) 294-9632

*****FAX COVER SHEET*******DATE:**1/26/94**COPIES BEING TRANSMITTED:**2

(Including Cover Sheet)

DELIVER TO:Nike Stogren505 - 827-~~5111~~**FROM:**Greg Martin505-827-5741**COMMENTS:**

Forwarding signed waiver to you
per instructions from Ernie Busch

IF TRANSMISSION IS NOT COMPLETE PLEASE CALL: (303) 296-8945

JAN 26 '94 09:44 OGD AZTEC NM

P.2

dugan production corp.

January 6, 1994

--Certified Mail--

Celsius Energy
P.O. Box 11070
Salt Lake City, UT 84147

Re: Application for Administrative Approval of
Unorthodox Location for Dugan Production Corp's Okie #1
1105' FSL & 840' FSL, Sec. 8, T24N, R9W, NMPH
San Juan County, NM

Gentlemen:

A copy of Dugan Production's Application for Administrative Approval of the unorthodox location for the subject well has been enclosed for your review.

If you do not have any objection to this unorthodox location, please sign all four copies of this waiver. Please send one executed copy each to the New Mexico Oil Conservation Division in Aztec and Santa Fe, NM and one executed copy to our office. Self-addressed, stamped envelopes are enclosed. The remaining copy is for your records.

Thank you for your assistance and cooperation in this matter.

Sincerely,

Jim L. Jacobs
Jim L. Jacobs
Vice-President

KF/cg

encls.

RECEIVED
JAN 24 1994
ON CON. DIV.
DIST. 3

WAIVER

Celsius Energy hereby waives objection to the above referenced application for unorthodox location for Dugan Production Corp's Okie #1 Well.

Date: 1/26/94By: *General Manager*

709 E. MURRAY DR. • P. O. BOX 420 • FARMINGTON, N.M. 87499-0420 • PHONE: (505) 325-1821 • FAX# (505) 327-4613



OIL CONSERVATION DIVISION
RECEIVED

STATE OF NEW MEXICO

ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

94 JAN 27 AM 10 03

OIL CONSERVATION DIVISION
AZTEC DISTRICT OFFICE

1000 RIO BRAZOS ROAD
AZTEC, NEW MEXICO 87410
(505) 334-6178

Date: 1-26-94

Attn: Mike Stogner

Oil Conservation Division
P.O. Box 2088
Santa Fe, NM 87504-2088

RE: Proposed MC _____
Proposed NSL A _____
Proposed WFX _____
Proposed NSP _____

Proposed DHC _____
Proposed SWD _____
Proposed PMX _____
Proposed DD _____

Gentlemen:

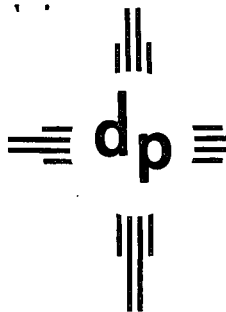
I have examined the application received on 1-2-94
for the DUGAN PROD CORP French OKE #1
OPERATOR LEASE & WELL NO.

P-08-24N-08W and my recommendations are as follows:
UL-S-T-R

Approve

Yours truly,

Euro Burch



dugan production corp

OIL CONSERVATION DIVISION
RECEIVED

94 JAN 20 AM 8 58

January 18, 1994

Mr. Michael E. Stogner
New Mexico Oil Conservation Division
P.O. Box 2088
Santa Fe, NM 87504-2088

**Re: Application for Administrative Approval of
Unorthodox Location for Dugan Production Corp's Okie #1
Basin Fruitland Coal
1105' FSL & 840' FEL,
Unit P, Sec. 8, T24N, R8W, NMPM
San Juan County, New Mexico**

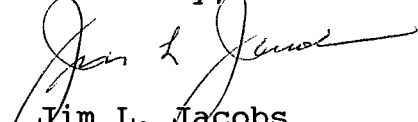
Dear Mr. Stogner:

Attached please find a copy of the letter mailed to Celsius Energy, the only offset operator involved in the subject application. We mailed this to Celsius Energy at their Salt Lake City office, and they forwarded it to their Denver office. A copy of the receipt for Certified Mail is attached. Our office does not have the return receipt card, but received verbal confirmation from Mr. John Geyer of Celsius Energy's Denver office of receipt of the attached letter and subject application.

If you need further information to complete the subject filing, please contact Cheri Gunn at 505-325-1821, ext. 29.

Thank you.

Sincerely,


Jim L. Jacobs
Vice-President

encs.

cg

*Note: Cols 1st three
pages to E. Busch
1/21/94*

P 157 111 468



**Receipt for
Certified Mail**

NO INSURANCE COVERAGE PROVIDED
DO NOT USE FOR INTERNATIONAL MAIL
(See Reverse)

PS Form 3800, June 1991 Okie #1 / cg

Sent to	
Celsius Energy	
Street and No.	
P.O. Box 11070	
City, State and Zip Code	
Salt Lake City, UT 84147	
Postage	\$.75
Postnet Fee	
Special Delivery Fee	1.00
Registered Delivery Fee	
Return Receipt (to be sent to Whom, Name, and Address)	1.00
TOTAL Postage & Fees	\$ 2.75
Postmark or Date	
1/6/91	



dugan production corp.



--Certified Mail--

January 6, 1994

Celsius Energy
P.O. Box 11070
Salt Lake City, UT 84147

**Re: Application for Administrative Approval of
Unorthodox Location for Dugan Production Corp's Okie #1
1105' FSL & 840' FEL, Sec. 8, T24N, R8W, NMPM
San Juan County, NM**

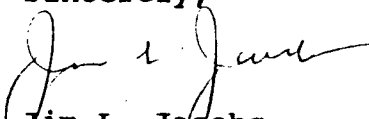
Gentlemen:

A copy of Dugan Production's Application for Administrative Approval of the unorthodox location for the subject well has been enclosed for your review.

If you do not have any objection to this unorthodox location, please sign all four copies of this waiver. Please send one executed copy each to the New Mexico Oil Conservation Division in Aztec and Santa Fe, NM and one executed copy to our office. Self-addressed, stamped envelopes are enclosed. The remaining copy is for your records.

Thank you for your assistance and cooperation in this matter.

Sincerely,


Jim L. Jacobs
Vice-President

KF/cg

encs.

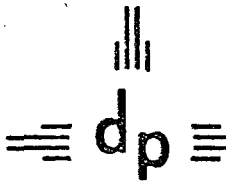
=====

WAIVER

Celsius Energy hereby waives objection to the above referenced application for unorthodox location for Dugan Production Corp's Okie #1 Well.

Date

By:



dugan production corp.

January 6, 1994

Mr. Michael E. Stogner
New Mexico Oil Conservation Division
P.O. Box 2088
Santa Fe, NM 87504-2088

Re: Application for Administrative Approval of
Unorthodox Location for Dugan Production Corp's Okie #1
1105' FSL & 840' FEL, Sec. 8, T24N, R3W, NMPM
San Juan County, New Mexico
Basin Fruitland Coal

Dear Mr. Stogner:

We hereby request approval for an unorthodox location for the subject well. Copies of the well location plat, topographic map, a production map and a map showing offsetting operators are attached for your reference.

The unorthodox location is necessary in order to salvage the wellbore of an unsuccessful Pictured Cliffs test. Originally, the Okie #1 was drilled to test the Pictured Cliffs Sandstone. The test was unsuccessful, the zone will be abandoned and a completion in the Fruitland Coal will be undertaken.

A copy of this application is being submitted to all offsetting operators by certified mail with a request that they furnish your office with a waiver of objection.

We request your approval of this location under the provisions of NMOCD Order No. R-8768, Rule #8.

Sincerely,

Jim L. Jacobs
Vice-President

KF/cg

attachs.

cc: Mr. Ernie Busch, NMOCD Aztec
Offsetting Operators
BLM, Farmington

NEW MEXICO OIL CONSERVATION COMMISSION WELL LOCATION AND ACERAGE DEDICATION PLAT

1105' E
840' E
6917

All distances must be from the outer boundaries of the Section

Operator OKLAHOMA OIL COMPANY			Lease FRENCH WASH		Well No. 1
Unit Letter P	Section 8	Township 24 NORTH	Range 8 WEST	County SAN JUAN	
Actual Footage Location of Well: 1105 feet from the SOUTH line and 840 feet from the EAST line					
Ground Level Elev. 6917	Producing Formation Pictured Cliff		Pool Wildcat	Dedicated Acreage: 160	

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 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 Commission.

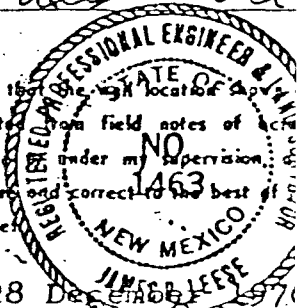
CERTIFICATION

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

John Alexander
Name
Agent
Position
Oklahoma Oil Company
Company
12-30-76
Date

John Alexander

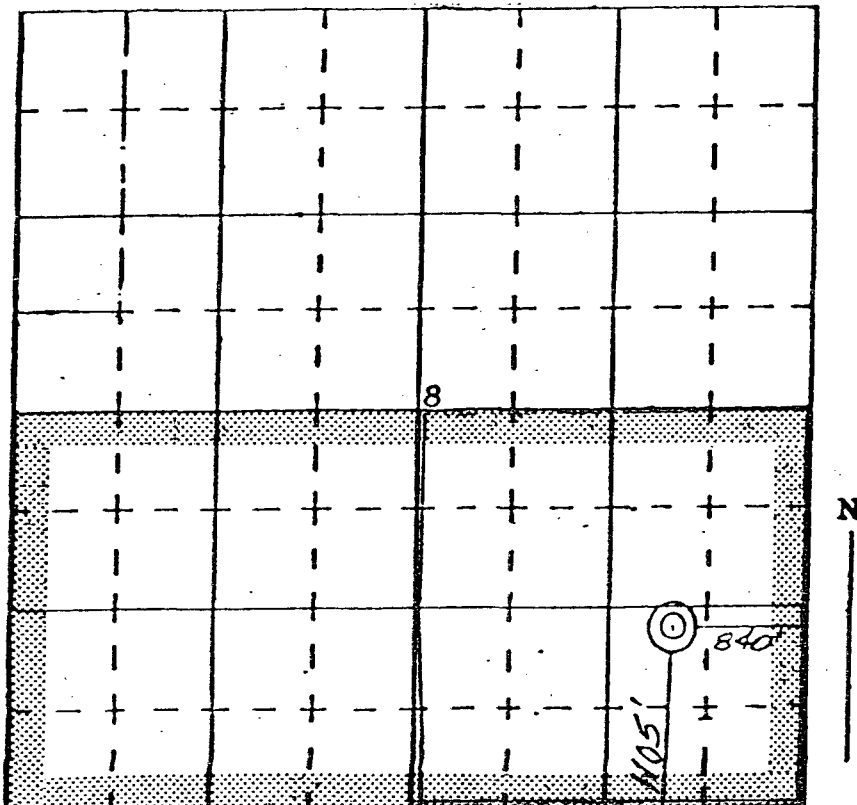
I hereby certify that the location of this plat was plotted from field notes of surveys made by me under my supervision, that the same is true and correct to the best of knowledge and belief.



James P. Lees
Date Surveyed
Registered Professional Engineer
and/or Land Surveyor James P. Lees

1463

Certificate No.



R8W

Okie #1

T
24
N

Blanco

Crow

Wash

APPLICATION FOR
UNORTHODOX LOCATION
TOPOGRAPHIC MAP

DUGAN PRODUCTION CORP.
OKIE #1
1105' FSL - 840' FEL
Sec. 8, T24N, R8W, NMPM
SAN JUAN CO., NM

	NM-2337 Dugan	Morgan-Richard	Yates etal.	Federal (Open)	Merrion
		Giant Exp.			
R.K. Lewis -Fee					
T 24 N			NM-19567 Dugan	Celsius Ener.	Yates etal.
			Okie ☀		NM-16789 Dugan
Navajo Allotted (Open)	NM-85307 Dugan		NM-26047 Dugan		LG-1917 Dugan
				Mesa Petr.	
			R8W		

APPLICATION FOR
UNORTHODOX LOCATION
OFFSETTING OPERATORS

DUGAN PRODUCTION CORP.
OKIE #1
1105' FSL - 840' FEL
Sec. 8, T24N, R3W, NMPM
SAN JUAN CO., NM