

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018**SUNDRY NOTICES AND REPORTS ON WELLS**
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.***SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	2. Name of Operator DUGAN PRODUCTION CORPORATION Contact: ALIPH REENA Email: aliph.reena@duganproduction.com	5. Lease Serial No. NMNM0206994
3a. Address PO BOX 420 FARMINGTON, NM 87499-0420	3b. Phone No. (include area code) Ph: 505.325.1821	6. If Indian, Allottee or Tribe Name
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 26 T30N R14W NESE 1640FSL 1120FEL 36.782360 N Lat, 108.272750 W Lon		7. If Unit or CA/Agreement, Name and/or No. SCR248
		8. Well Name and No. HORACE SMITH 1R
		9. API Well No. 30-045-24346-00-S1
		10. Field and Pool or Exploratory Area UNNAMED Basin Dakota
		11. County or Parish, State SAN JUAN COUNTY, NM

12. CHECK THE APPROPRIATE BOX(ES) 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"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomple horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recomple in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

Operator requests to change well name from Horace Smith #1R to Horace Smith Com #1R. C-102 is attached.

NMOCB

DISTRICT III

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

Electronic Submission #488575 verified by the BLM Well Information System
For DUGAN PRODUCTION CORPORATION, sent to the Farmington
Committed to AFMSS for processing by MELISSA REEVES-WIENTJES on 10/17/2019 (20MRW0032SE)

Name (Printed/Typed) ALIPH REENA

Title ENGINEERING SUPERVISOR

Signature (Electronic Submission)

Date 10/16/2019

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

ACCEPTED

MELISSA REEVES-WIENTJES
Title LAND LAW EXAMINER

Date 10/17/2019

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office Farmington

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make 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.

(Instructions on page 2)

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

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<div>16</div>		<div>17 OPERATOR CERTIFICATION</div> <p><i>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.</i></p> <div><div>Tyra M. Feil</div><div>Signature</div></div> <div><div>10/7/19</div><div>Date</div></div> <div><div>Tyra M. Feil</div><div>Printed Name</div></div> <div><div>tyrafeil@duganproduction.com</div><div>E-mail Address</div></div>	
<div>NM 33050</div>	<div>26</div>	<div>NM 0206994</div>	<div>1120'</div>
<div>NM 0206994</div>	<div>Fee</div>	<div>1640'</div>	

"SURVEYOR CERTIFICATION

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, and that the same is true and correct to the best of my belief.

Survey date 3/13/80

Date of Survey

Signature and Seal of Professional Surveyor:

Surveyed by Edgar L. Risenhoover, Certificate Number 5979

Certificate Number