

5 BLM 1 Husky 1 File
UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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.)

RECEIVED

JUL 29 1986

RECEIVED

AUG 29 1986

5. LEASE DESIGNATION AND SERIAL NO.

NM 14729

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Husky Federal

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Undesignated Gallup

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

Sec. 25, T21N, R4W, NMPM

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, or L)
7088' GL; 7100' RKB

12. COUNTY OR PARISH

Sandoval

13. STATE

NM

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) Shut-in well

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

X

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.)

By this Sundry Notice, Dugan Production Corp. is asking for permission to shut this well in due to its becoming uneconomical to produce under current oil prices.

This Approval or Temporary
Abandonment Expires

SEP 04 1987

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

SIGNED

Jim L. Jacobs

TITLE Geologist

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED
AS AMENDED

DATE

SEP 04 1986

For AREA MANAGER

SEE ATTACHED FOR
CONDITIONS OF APPROVAL

*See Instructions on Reverse Side

NMOCC