

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on reverse 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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER P & A <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM 51005	
2. NAME OF OPERATOR DUGAN PRODUCTION CORP.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P O Box 208, Farmington, NM 87499		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 1650' FSL - 1650' FEL		8. FARM OR LEASE NAME McDougall	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, CR, etc.) 6572' GL; 6584' RKB		10. FIELD AND POOL, OR WILDCAT Undesignated Gallup	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 17, T23N, R10W, NMPM	
		12. COUNTY OR PARISH San Juan	13. STATE NM

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AUG - 3 11 9:37
FARMINGTON RESOURCE DEPT.
FARMINGTON, NEW MEXICO

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"/>	PCLL 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 checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <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 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 plugged on 7-29-87 as follows:
1. Spotted cement plug across Gallup perms 4448' - 4100' - 30 sx. (35.4 cf).
 2. Spotted cement plug across Mesaverde formation 1999' - 1493' - 40 sx (47.2 cf).
 3. Spotted cement plug across Chacra formation 1284' - 1174' - 10 sx (11.8 cf).
 4. Spotted cement plug across Pictured Cliffs formation 862' - 762' - 10 sx (11.8 cf).
 5. Spotted cement plug 212' to surface - 20 sx (23.6 cf).
 6. Will install dry hole marker & restore location at a later date.

Note: Placed 9.2#± drilling mud between plugs.

Approved on 7-31-87
Liability under contract
surface restoration to original

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

SIGNED Jim L. Jacobs
(This space for Federal or State office use)

TITLE Geologist

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

APPROVED

DATE 7-31-87

RECEIVED
AUG 05 1987
OIL CON. DIV
DIST. 3

DATE Aug 04 1987
DATE John Skellan
FARMINGTON RESOURCE DEPT.
FARMINGTON, NEW MEXICO