

Form Approved.  
Budget Bureau No. 42-R1424

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

## 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 Form 9-331-C for such proposals.)

1. oil well ☒ gas well ☐ other ☐
- 
2. NAME OF OPERATOR  
Dugan Production Corp.
- 
3. ADDRESS OF OPERATOR  
P O Box 208, Farmington, NM 87499
- 
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 660' FNL - 1980' FWL  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

5. LEASE  
NM 16762
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME  
Witty
9. WELL NO.  
4
10. FIELD OR WILDCAT NAME  
Undesignated Gallup
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 12 T23N R10W, NMPM
12. COUNTY OR PARISH  
San Juan
13. STATE  
NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
6805' GL; 6817' RKB

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>
(other) _____	

SUBSEQUENT REPORT OF:

[illegible]

XX Spud & Surface Casing

RECEIVED

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)\*

M.I. & R.U. Four Corners Drilling Company rig #8. Spudded a 12 $\frac{1}{4}$ " hole at 11:00 A.M. on 8-10-84. Drilled to 217'. Ran 7 jts. 8-5/8" OD, 24#, 8 Rd ST&C casing (T.E. 201') set at 213' RKB. Cemented with 135 sks class "B" plus 2% CaCl<sub>2</sub> (total of 159 cf). P.O.B. at 3:15 P.M. on 8-10-84. Circulated 2 bbls cement to surface. (Pressure tested B.O.P. and surface casing with 800 psi for 30 minutes before drilling out cement - held OK).

RECEIVED

AUG 22 1984

OIL CON. DIV

Subsurface Safety Valve: Manu. and Type

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

SIGNED

by certify that the foregoing

*Jim L. Jacobs*  
Jim L. Jacobs

TITLE Geologist

DATE 8-13-84

(This space for Federal or State office use)

8-15-84  
ACCEPTED FOR RECORD

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE \_\_\_\_\_

~~AUG 21 1984~~

NMOCs

FARMINGTON RESOURCE AREA

BY