

5 BLM 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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	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 and in accordance with any State requirements. See also space 17 below.) At surface 1980' FNL & 1980' FEL	5. ELEVATIONS (Show whether OF, RT, GR, etc.) 6550' GL; 6562' RKB	6. LEASE DESIGNATION AND SERIAL NO. NM 32124	7. IF INMAN, ALLOTTEE OR TRIBE NAME	8. UNIT AGREEMENT NAME	9. FARM OR LEASE NAME Calgary	10. WELL NO. 2	11. FIELD AND POOL, OR WILDCAT South Bisti Gallup	12. SEC. T, R, M., OR BLK. AND SUBST OR AREA Sec. 6, T23N, R10W, NMPM	13. COUNTRY OR PARISH San Juan	14. STATE NM
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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"/>	CELL 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"/>	TD, 4 1/2" casing & cement <input checked="" 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.)

T.D. 4670' reached on 1-16-88
Laid down drill pipe and collars. Rigged up and ran 114 jts. 4 1/2" O.D., 10.5#, J-55, 8 Rd, ST&C casing (T.E. 4682.75') set @ 4674'. Cemented 1st stage w/ 10 bbls mud flush followed by 180 sx 50-50 pos + 2% gel & 6 1/2# of gilsonite/sk & 1/2# celloflake/sk (total cement slurry first stage = 252 cubic feet.) Had full mud returns while cementing. Reciprocated casing OK while cementing. Bumped plug w/1200 psi - held OK. Dropped opening bomb. Opened stage tool @ 3606'. Circulated with rig pump for 2 1/2 hours. Cemented 2nd stage w/ 10 bbls mud flush followed by 515 sx 65-35 + 12% gel + 1/2# celloflake/sk followed by 50 sx 50-50 pos + 2% gel & 1/2# celloflake/sk (total cement slurry 2nd stage = 1202 cf). Total cement slurry used in both stages = 1454 cubic feet. Full returns while cementing 2nd stage. Circulated mud flush plus trace of contaminated cement. Closed stage tool with 2500 psi - held OK. Job complete @ 4:45 PM 1-16-88. Nippled down BOP, set 4 1/2" casing slips and released rig @ 6:45 PM 1-16-88.

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

SIGNED Jim L. Jacobs TITLE Geologist DATE 1-18-88
(This space for Federal or State office use)
APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
JAN 27 1988
OIL CON. DIV.
DIST. 3