Form 3160-5 (June 1990)

H

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

| FORM APPROVED |         |           |  |  |
|---------------|---------|-----------|--|--|
| Budget Burn   | eau No. | 1004-0135 |  |  |
| Expires:      | March   | 31, 1993  |  |  |

Expires: March 31, 1993

Lease Designation and Serial N

| Э. | Lease | Designation | 217.1 | 301 |
|----|-------|-------------|-------|-----|
|    | NM    | 43438       |       |     |

|                                                                                                                                                                                                        | NM 43438                                                                                                 |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|--|--|
| SUNDRY NOTICES AND REPORTS ON WELLS  Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  Use "APPLICATION FOR PERMIT—" for such proposals                   | 6. If Indian, Allottee or Tribe Name                                                                     |  |  |
| SUBMIT IN TRIPLICATE                                                                                                                                                                                   | 7. If Unit or CA, Agreement Designation                                                                  |  |  |
| 1. Type of Well Oil X Gas Well Other                                                                                                                                                                   | 8. Well Name and No.                                                                                     |  |  |
| 2. Name of Operator  Dugan Production Corp.                                                                                                                                                            | Cleve Kyle #1  9. API Well No.                                                                           |  |  |
| 3. Address and Telephone No.                                                                                                                                                                           | 30-045-28550                                                                                             |  |  |
| P.O. Box 420, Farmington, NM 87499 (505) 325-1821                                                                                                                                                      | 10. Field and Pool, or Exploratory Area                                                                  |  |  |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)                                                                                                                                 | Risti Chacra 11. County or Parish, State                                                                 |  |  |
| 1735' FNL & 900' FEL                                                                                                                                                                                   | San Juan, New Mexico                                                                                     |  |  |
| Sec. 18, T22N, R8W, NMPM                                                                                                                                                                               |                                                                                                          |  |  |
| CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPOR                                                                                                                                           | RT, OR OTHER DATA                                                                                        |  |  |
| TYPE OF SUBMISSION TYPE OF ACTION                                                                                                                                                                      |                                                                                                          |  |  |
| Notice of Intent D E C E WE Abandonment                                                                                                                                                                | Change of Plans                                                                                          |  |  |
| Recompletion                                                                                                                                                                                           | New Construction Non-Routine Fracturing                                                                  |  |  |
| Subsequent Report LL MAY - 7 1937 LD Plugging Back Casing Repair                                                                                                                                       | Water Shut-Off                                                                                           |  |  |
| Final Abandonment Color CO No. 1000 Altering Casing Color Long-Term Shut-In                                                                                                                            | Conversion to Injection                                                                                  |  |  |
| Oll GON Other Long-Term Shut-In                                                                                                                                                                        | Dispose Water                                                                                            |  |  |
| DIST: 3  13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting                                            | (Note: Report results of multiple completion on Well<br>Completion or Recompletion Report and Log form.) |  |  |
| Currently there is no pipeline or gathering system We are studying the feasibility to acquire right-of gathering system. A long-term shut-in is request                                                | -way and lay a                                                                                           |  |  |
| study is in progress.                                                                                                                                                                                  | • O                                                                                                      |  |  |
|                                                                                                                                                                                                        | 17 HAY 070 F                                                                                             |  |  |
| APPROVAL EXPIRES DEC 3 1 1999                                                                                                                                                                          | -1 PH :                                                                                                  |  |  |
|                                                                                                                                                                                                        |                                                                                                          |  |  |
| 14. I hereby certify that the foregoing is true and correct  Signed Title Operations Manager                                                                                                           | Date4/30/97                                                                                              |  |  |
| Signed Cary Brink  (This space for Federal of State office use)                                                                                                                                        |                                                                                                          |  |  |
| Approved by Title                                                                                                                                                                                      | Date <u>MAY - 5 1997</u>                                                                                 |  |  |
|                                                                                                                                                                                                        | ***                                                                                                      |  |  |
| Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United S or representations as to any matter within its jurisdiction. | states any false, fictitious or fraudulent statements                                                    |  |  |
|                                                                                                                                                                                                        |                                                                                                          |  |  |

\*See Instruction on Reverse Side