

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY(See instructions on
reverse side)

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other ☐		2. NAME OF OPERATOR DUGAN PRODUCTION CORP.	
3. ADDRESS OF OPERATOR P O Box 208, Farmington, NM 87401		4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1800' FNL - 1650' FEL At top prod. interval reported below At total depth	
15. DATE SPUDDED Re-entry 10-1-81		16. DATE T.D. REACHED 10-13-81	
17. DATE COMPL. (Ready to prod.) 10-29-81		18. ELEVATIONS (OF, REB, BT, GR, ETC.)* 7642	
20. TOTAL DEPTH, MD & TVD 3869		21. PLUG, BACK T.D., MD & TVD 3828	
22. IF MULTIPLE COMPL., HOW MANY* single		23. INTERVALS DRILLED BY ROTARY TOOLS TD CABLE TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3740-3780 Pictured Cliffs		25. WAS DIRECTIONAL SURVEY MADE NO	
26. TYPE ELECTRIC AND OTHER LOGS RUN CCL		27. WAS WELL CORED NO	
28. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE
*8-5/8"		124'	12 1/4"
*5-1/2"	15.5	3866'	
*Original completion			
29. LINER RECORD			
SIZE	TOP (MD)	BOTTOM (MD)	SCREEN (MD)
30. TUBING RECORD			
SIZE	DEPTH SET (MD)	PACKER SET (MD)	
1 1/2"	3746'	none	
31. PERFORATION RECORD (Interval, size and number)			
3770-80, 10 shots			
3740-50, 10 shots			
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
3740-80		6 bbls 15% HCL, 195,500 SCF N ₂ , 36 gal Adafoam, 15,000# 10-20 sd	
33. PRODUCTION			
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	
		flowing	
DATE OF TEST		CHOKE SIZE	
11-28-81		1" pos.	
HOURS TESTED		PROD'N. FOR TEST PERIOD	
3			
OIL—BSL.		GAS—MCF.	
		124	
WATER—BSL.		GAS—OIL RATIO	
FLOW. TUBING PRESS.		CASING PRESSURE	
11 psi Choke		169 psi	
CALCULATED 24-HOUR RATE		OIL—BSL.	
		161 CAOF	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		TEST WITNESSED BY	
35. LIST OF ATTACHMENTS			
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records			
SIGNED		TITLE	
Thomas A. Dugan		Petroleum Engineer	
DATE		DATE	
12-1-81		12-1-81	

*See Instructions and Spaces for Additional Data on Reverse Side

**TOPS REPORTED ON ORIGINAL COMPLETION.

OPERATOR NMOCD

FARMINGTON DISTRICT

BY

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