

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR DUGAN PRODUCTION CORP.	8. FARM OR LEASE NAME Hurt
3. ADDRESS OF OPERATOR P.O. Box 208, Farmington, NM 87499	9. WELL NO. 4
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1850' FSL & 1850' PEL	10. FIELD AND POOL, OR WILDCAT Tapacito PC
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR ARMA Sec. 14, T25N, R3W, NMPM
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 7358' GR	12. COUNTY OR PARISH Rio Arriba
	13. STATE NM

14

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) Request Extension of Long-term SI	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <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.)*

We request an extension of 60 days for the long-term shut-in approval for the above referenced well. We have acquired the line, installed a new connection to the existing meter run, installed new meter runs and currently are waiting to hear from El Paso Natural Gas Co. (EPNG) as to the status of the conversion of the existing meter (for the Hurt No. 5) to a central point delivery meter. It is our understanding that all requirements have been met to initiate this conversion with EPNG and as soon as this conversion is done, we will be able to turn on the Hurt No. 3 and the Hurt No. 4. We have requested 60 days to allocate enough time for any additional problems which may develop.

RECEIVED
JUN 17 1988
OIL COM. DIV.
DIST. 3

THIS

8/8/88

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

SIGNED Jim L. Jacobs

TITLE Geologist

DATE 6-6-88

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side

BLM/000