

Form 315G-5
(June 1990)UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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.

SUBMIT IN TRIPLICATE

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.

NM 19567

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Okie 2

9. API Well No.

30-045-22304

10. Field and Pool, or Exploratory Area

Basin Fruitland Coal

11. County or Parish, State

San Juan, NM

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

Dugan Production Corp.

3. Address and Telephone No.

P.O. Box 420, Farmington, NM 87499 (505) 325-1821

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1450' FNL - 1500' FWL

f Sec. 8, T24N, R8W, NMPM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐
- Notice of Intent
-
- ☒
- Subsequent Report
-
- ☐
- Final Abandonment Notice

TYPE OF ACTION

- ☐
- Abandonment
-
- ☒
- Recompletion
-
- ☐
- Plugging Back
-
- ☐
- Casing Repair
-
- ☐
- Altering Casing
-
- ☐
- Other
-
- ☐
- Change of Plans
-
- ☐
- New Construction
-
- ☐
- Non-Routine Fracturing
-
- ☐
- Water Shut-Off
-
- ☐
- Conversion to Injection
-
- ☐
- Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

10/11/96 This well was recompleted in the Fruitland Coal as follows:

- 1.) Set a CIBP @ 2000'. Tested casing to 2000# - OK. Perforated Fruitland Coal 1982-91'.
- 2.) Stimulated formation with 1000 gals 15% HCL and 29,150 gals 70Q foam and 6000# 40/70 sand and 36,000# 12/20 sand. Flowed back for clean up.
- 3.) Rig up swab unit and clean out sand to 2000'. Ran 63 joints 1 1/2" 2.4# J-55 tubing set at 1866'. Swabbed in.

A plat for the Fruitland Coal is on the reverse of this sundry.

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

Signed

Gary Brink

Title Operations Manager

Date

11/21/96

(This space for Federal or State office use)

NOV 26 1996

Approved by
Conditions of approval, if any:

Title

Date

FARMINGTON DISTRICT OFFICE

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 States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side
NMCCD

District I
PO Box 1988, Hobbs, NM 88241-1988
District II
PO Drawer DD, Artesia, NM 88211-8719
District III
1800 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-102
Revised February 21, 1994
Instructions on back
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30 045 22304		Pool Code 71629	Pool Name Basin Fruitland Coal
Property Code 003793	Property Name Okie		Well Number 2
OGRID No. 006515	Operator Name Dugan Production Corp.		Elevation 6866' GL

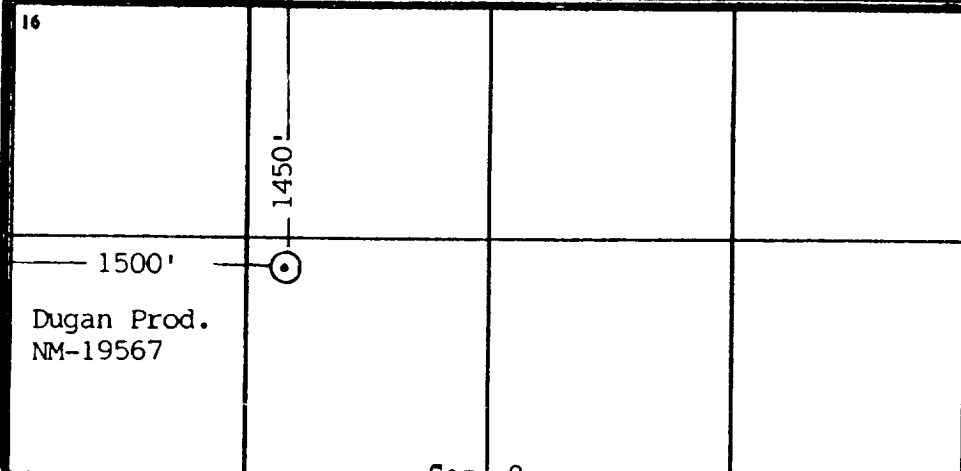
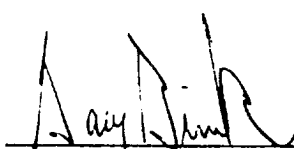
10 Surface Location

UL or lot no. F	Section 8	Township 24N	Range 8W	Lot Ida	Feet from the 1450	North/South line North	Feet from the 1500	East/West line West	County San Juan
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11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South line	Feet from the	East/West line	County		
Dedicated Acres 320					Joint or Infill					Consolidation Code	Order No. Unorthodox Location Approved 4/1/96 Administrative Order NSL-3645

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

16 	17 OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.  Signature Gary Brink Printed Name Operations Manager Title 4/8/96 Date	
	18 SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief. December 28, 1976 Date of Survey Signature and Seal of Professional Surveyer: Redraft of original plat- Original signed by James P. Leese 1463 Certificate Number	