

**UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY**

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R1424.

**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. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. <b>14-20-0603-1405</b>
2. NAME OF OPERATOR <b>Dugan Production Corp.</b>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR <b>P. O. Box 234, Farmington, NM 87401</b>		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) <b>At surface</b>  <b>790' FNL - 790' FEL</b>		8. FARM OR LEASE NAME <b>Blanco Wash</b>
14. PERMIT NO.		9. WELL NO. <b>#4</b>
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>6558' GR</b>		10. FIELD AND POOL, OR WILDCAT <b>Undesignated</b>
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data.		11. SEC., T., R., M., OR BLK. AND SURVEY OR ARMA <b>Section 2 24N 19W</b>
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.)*		12. COUNTY OR PARISH 13. STATE <b>San Juan NM</b>

**NOTICE OF INTENTION TO:**

TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)	FULL OR ALTER CASING MULTIPLE COMPLETE ABANDON* CHANGE PLANS
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**SUBSEQUENT REPORT**

WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) <b>Spud and Surface Csg</b>	REPAIRING WELL ALTERING CASING ABANDONMENT*
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(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.)\*

3-9-78

Moved in and rigged up Four Corners Drlg Co. Rig #2. Spudded 12-1/4" hole @ 6:00 p.m. Drlg to 220'. Ran 7 jts 8-5/8" OD 24# K-55 8R csg set @ 220' RKB. Cemented w/140 sx neat. Job complete 10:30 p.m. Dev. survey 1/4" @ 220'.

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

SIGNED

Thomas A. Dugan

TITLE Petroleum Engineer

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

DATE