•	armington) I-Harv- UNITED ST		JBMIT IN TRIPLICATE®	Form approved. Budget Bureau No. 42-R1424.
Form 9-331 May 1963)	DEPARTMENT OF T	HE INTERIOR	liki Imperusationa on Pa	5. LEASE DESIGNATION AND SERIAL NO.
	GEOLOGICAL			NM 9520
C11) 15	ORY NOTICES AND		/FLLS	6. IF INDIAN, ALLOTTER OR TRIBE NAME
SUNL	OF THE PROPERTY OF THE PROPERT	deepen or plug back to a	different reservoir.	
(170 Hot use 12 5 1	Use "APPLICATION FOR PERM	III— for such proposata.)		7. UNIT AGREEMENT NAME
OIL GAS S	7			
WELL WELL Z	OTHER			8. FARM OR LEASE NAME
Dugan Production Corp.				Elwood P. Dowd
3. ADDRESS OF OPERATOR				#1
Box 234, Farmington, NM 87401 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*				10. FIELD AND FOOL, OR WILDCAT
4. LOCATION OF WELL (Re See also space 17 below At surface	w.)			Wildcat
	-SL - 790' FEL			11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA
1130 .				Section 10 T24N R9W
	15 Praya Trong	(Show whether DF, RT, GR,	etc.)	Section 10 T24N R9W 12. COUNTY OR-PARISH 13. STATE
14. PERMIT NO.		729' GR	····,	San Juan NM
			(Nation Parent of	Other Data
16.	Check Appropriate Box	lo Indicate Nature	of 140tice, Report, of	QUENT REPORT OF:
, N	OTICE OF INTENTION TO:			REPAIRING WELL
TEST WATER SHUT-OF	11		WATER SHUT-OFF FRACTURE TREATMENT	ALTERING CASING
FRACTURE TREAT	MULTIPLE COMPI.	"* - ——	SHOOTING OR ACIDIZING	XX ABANDONMENT*
SHOOT OR ACIDIZE REPAIR WELL	CHANGE PLANS		(Other)	ts of multiple completion on Well
			Completion or Recom	pletion Report and Log form.)
17. DESCRIBE PROPOSED OR	COMPLETED OPERATIONS (Clearly well is directionally drilled, give	state all pertinent detail e subsurface locations an	s, and give pertinent date d measured and true verti	s, including estimated date of starting any cal depths for all markers and zones perti-
nent to this work.) *				그 그는 그렇게 있는 것이 없어요?
			•	
7-10-79	Moved in and rig	ged up FWS swat	bing unit. Che	ecked PBTD 2270'.
, 10 /3	Swabbed 2-7/8" csg down to 1500'. Blue Jet per			ert w/2 2-1/8 glass
	jets per foot 1740-1744'. (8 holes). Swabbed			l csg down. Very 5 minutes. Not
	slight show gas ahead of swab. Let well sit !! enough fluid in hole to load swab.			.5 minutes. Not
	enough fluid in	Hole to load sh	ab.	
7-11-79	Acidized by Alli	ed Services w/2	!50 gals 15% HCl	regular acid and
7-11-73	2 gals Tretolite liquid foamer followed by 11 bbls water.			
	Average TP 400 p	si @ 1-1/2 B/M.		
				/
				1 Sur Sent
				19/2 0 3 20
				10000000
	/1			
	the foregoing/is true and corre	ect		
18. I hereby certury that	1. Kush	TITLE Petrol	eum Engineer	DATE7-12-79
SIGNED Thomas	A. Dugan	. 11100		
(This space for Fede	ral or State office use)			
APPROVED BY	V ANV	TITLE		DATE
CONDITIONS OF AL	PPROVAL, IF ANY:			1

*See Instructions on Reverse Side

James d. Sems