

5 BLM 1 Harvey 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"/> CAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> | | 3. LEASE DESIGNATION AND SERIAL NO. NM 9520 | |
| 2. NAME OF OPERATOR DUGAN PRODUCTION CORP. | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME | |
| 3. ADDRESS OF OPERATOR P.O. Box 5820, Farmington, NM 87499-5820 | | 7. UNIT AGREEMENT NAME | |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1190' FSL - 790' FEL | | 8. FARM OR LEASE NAME Elwood P. Dowd | |
| 14. PERMIT NO. | | 9. WELL NO. 1 | |
| 15. ELEVATIONS (Show whether DF, ET, GR, etc.) 6729' GR | | 10. FIELD AND POOL, OR WILDCAT Basin-Fruitland Coal | |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 10, T24N, R9W, NMPM | |
| | | 12. COUNTY OR PARISH San Juan | |
| | | 13. STATE NM | |

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
(Other) ☐

PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☐
(Other) ☐

REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONMENT* ☒

Designation of Pool

(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.)

Per NMOCD Order No. R-8768, the subject well is now classified as being completed in the newly created Basin-Fruitland Coal Gas Pool instead of Undesignated Pictured Cliffs. Application for a non-standard proration unit of 160 acres is being processed.

A plat (NMOCD form C-102) reflecting this change is attached.

Effective date: 11-1-88.

RECEIVED

DEC 08 1988

OIL CON. DIV
DIST. C

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

SIGNED Jim L. Jacobs

TITLE Geologist

DATE 11-29-88

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side

NMOCC

BY _____

NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102
Supersedes C-128
Effective 1-1-65

All distances must be from the outer boundaries of the Section.

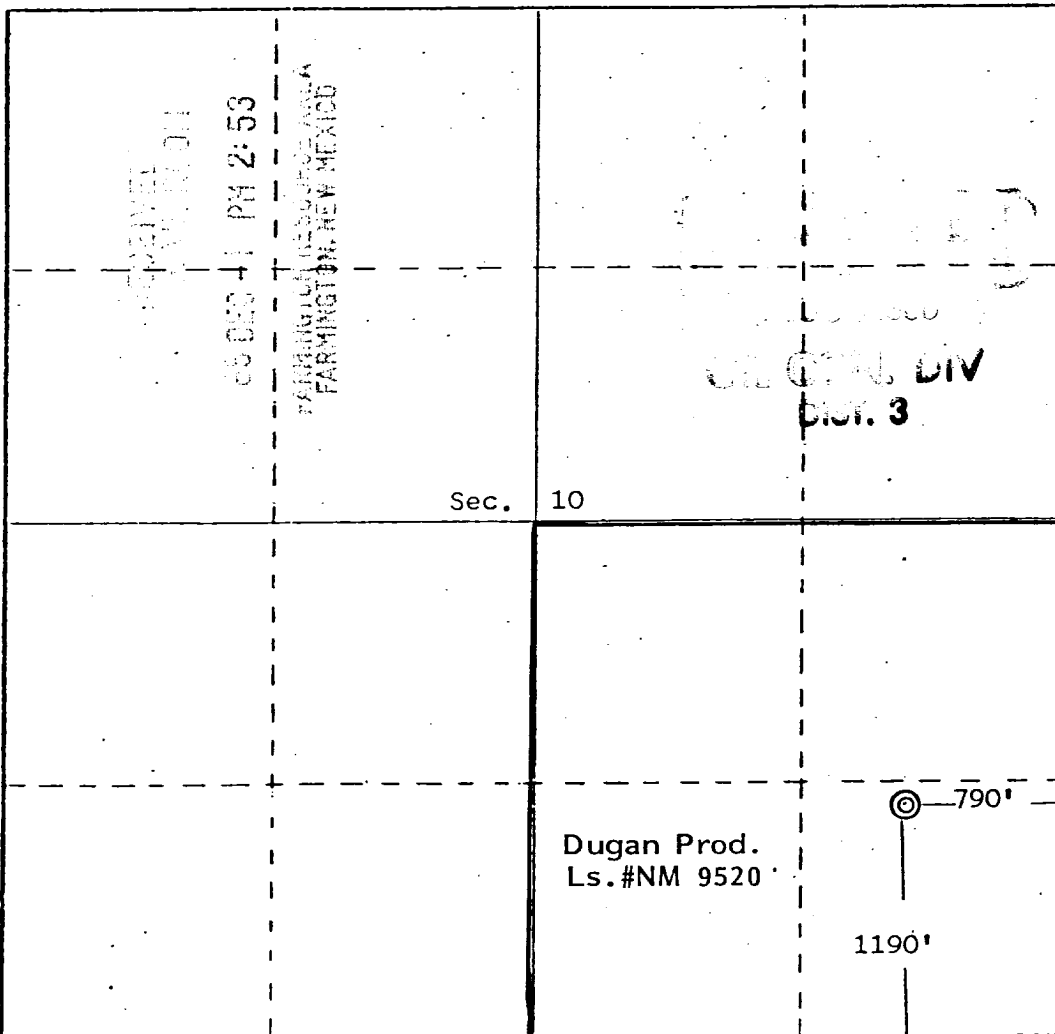
| | | | | | |
|---|--|-----------------------------|-------------------------------------|---------------------------|---|
| Operator Dugan Production Corporation | | | Lessee Elwood P. Dowd | | Well No. 1 |
| Unit Letter P | Section 10 | Township 24 North | Range 9 West | County San Juan | |
| Actual Footage Location of Well: 1190 feet from the South line and 790 feet from the East line | | | | | |
| Ground Level Elev. 6729 | Producing Formation Fruitland Coal | | Pool Basin-Fruitland Coal | | Dedicated Acreage: 160* Acres |

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission. ***Application for Non-Standard Proration Unit being processed.**



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Name
Jim L. Jacobs

Position
Geologist

Company
Dugan Production Corp.

Date
11-29-88

I hereby certify that the location shown on this plat was plotted from field notes of actual measurements made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed
April 29, 1979

Registered Professional Engineer and/or Land Surveyor

Edgar L. Risenhoover
Certificate No. **5979**

Edgar L. Risenhoover, L.S.