

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

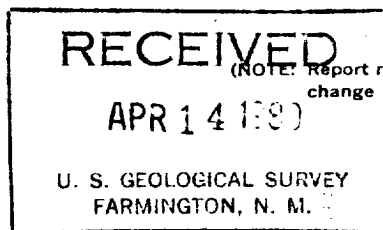
SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil well <input type="checkbox"/> gas well <input checked="" type="checkbox"/> other
2. NAME OF OPERATOR Dugan Production Corp.
3. ADDRESS OF OPERATOR Box 208, Farmington, NM 87401
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 790' FNL - 1670' FEL AT TOP PROD. INTERVAL: AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

5. LEASE NM 5991
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME June Joy
9. WELL NO. 2
10. FIELD OR WILDCAT NAME Basin Dakota
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 25 T. 24N. R10W
12. COUNTY OR PARISH San Juan
13. STATE NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD) 6853' GL

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF <input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE <input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES <input type="checkbox"/>	<input type="checkbox"/>
ABANDON* <input type="checkbox"/>	<input type="checkbox"/>
(other) cement squeeze	



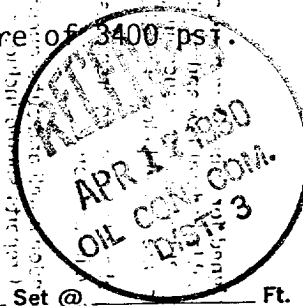
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

4-7-80
Went in hole with tbg and Baker Model K-1 mechanical cement retainer and set retainer at 6003' KB. Cementers Inc hooked up and loaded backside with water. Hooked up on tbg and pumped into formation @ 3 B/M @ 1700 psi.

Squeezed zone with 50 sx class "B" @ 2 B/M and max pressure of 3400 psi.
Shut well in w/3000 psi @ 1:28 p.m. Pulled tbg.

ACCEPTED FOR RECORD

APR 16 1980



Subsurface Safety Valve: Manu. and Type _____ BY E. J. [Signature] Set @ _____ Ft.

18. I hereby certify that the foregoing is true and correct
SIGNED Thomas A. Dugan TITLE President DATE 4-9-80

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

NMOCC

*See Instructions on Reverse Side