

Form 9-331
Dec. 1973Form Approved.
Budget Bureau No. 42-R1424UNITED 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 ☐ gas well ☒ other ☐ S. WELL NO. _____
2. NAME OF OPERATOR
Dugan Production Corp.
3. ADDRESS OF OPERATOR
P O Box 208, Farmington, NM 87401
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 790' FNL - 1520' FEL NW/4 NE/4
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

- TEST WATER SHUT-OFF ☐
- FRACTURE TREAT ☐
- SHOOT OR ACIDIZE ☐
- REPAIR WELL ☐
- PULL OR ALTER CASING ☐
- MULTIPLE COMPLETE ☐
- CHANGE ZONES ☐
- ABANDON* ☐
- (other) _____

SUBSEQUENT REPORT OF:

- ☐
- ☐
- ☐
- ☐
- ☐
- ☐
- ☐
- ☒

5. LEASE
NM 13612
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Snuffle-upagus
9. WELL NO.
#1
10. FIELD OR WILDCAT NAME
Wildcat PC
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 23 T24N R12W
12. COUNTY OR PARISH
San Juan
13. STATE
NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

RECEIVED

JUL 7 - 1983

OIL CON. DIV.
DIST. 3

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.)*

3-18-82 Plugged and abandoned this well in the following manner:

1. Filled 2-7/8" O.D., 6.4#, CW-55, 10 Rd, NEUE tubing for csg. from plug back TD 1100' to surface using 30 sx cement.
2. Installed permanent dry hole monument.
3. Filled all pits.
4. Cleaned well location of all equipment, pipe, junk, and trash.
5. Restored surface; will reseed next planting season.
6. Removed tie-downs.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Sherman E. Dugan TITLE Agent DATE 4-15-82

(This space for Federal or State office use)

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