Form 9-331 5 MMS, 1 McHugh, 1 Teni	neco, 1 File	Form Approved.  Budget Bureau No. 42-R1424	
UNITED STATES  DEPARTMENT OF THE INTERIOR  GEOLOGICAL SURVEY		5. LEASE NM 17015	-
		6. IF INDIAN, ALLOTTEE OR TRIBE NAM	ME
SUNDRY NOTICES AND REPOR	n or plug back to a different	7. UNIT AGREEMENT NAME	
1. oil gas gry		8. FARM OR LEASE NAME Herry Monster	
well well A.A. other		9. WELL NO.	
2. NAME OF OPERATOR DUGAN PRODUCTION CORP.  3. ADDRESS OF OPERATOR	1	O. FIELD OR WILDCAT NAME Basin Dakota	
P. O. Box 208, Farmington		1. SEC., T., R., M., OR BLK. AND SURV	/EY OR
4. LOCATION OF WELL (REPORT LOCATION below.)		Sec 12, T24N, R11W	
AT SURFACE: 790' FSL - 790' FI AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	WL 1	2. COUNTY OR PARISH 13. STATE San Juan New Mexic  4. API NO.  5. ELEVITIONS (SHOW DF, KDB, AN 6560) GL  County or Parish 13. STATE New Mexic New New Mexic New	00
16. CHECK APPROPRIATE BOX TO INDICATE	E NATURE OF NOTICE	4 API NO.	
REPORT, OR OTHER DATA	ENE	s. elevations (show df, kdb, an 6560 GL	D WD)
REQUEST FOR APPROVAL TO: SUBSECTION SUBSECT	OUT TO SEE 198	2	<del>-</del>
FRACTURE TREAT SHOOT OR ACIDIZE	MON 3'	SURVEY MOTE: Report results of multiple completion change on Form 9–330.)	
REPAIR WELL	OLOGICAL TOLOGICAL	NOTE: Report results of multiple completion	or zone
PULL OR ALTER CASING UMULTIPLE COMPLETE	U. S. ARMINGI	change on Form 9-330.)	
CHANGE ZONES			
(other)	XX Spud & Surface	: Casing	
17. DESCRIBE PROPOSED OR COMPLETED O including estimated date of starting any p measured and true vertical depths for all m	roposed work. If well is direct	ctionally drilled, give subsurface location	dates, ons and
hole @ 2:45 p.m. 11-2 7 its. 8-5/8" 0.D., 2	9-82. Drilled to 2 4#, 8 Rd, ST&C casi ks class "B" plus 2	g Co. Rig #10. Spudded 12 213'. (3/4 degree @ 213') ing. 189' set @ 200' RKB. 2% CaCl P.O.B. @ 7:30 p.m.	-1/4" . Rai
	t to surface. W.O.	<b>.</b>	
Subsurface Safety Valve: Manu. and Type			Ft.
Subsurface Safety Valve: Manu. and Type	nd correct	Set @	Ft.
Subsurface Safety Valve: Manu. and Type	nd correct	Set @	Ft.
Subsurface Safety Valve: Manu. and Type  18. I hereby certify that the foregoing is true and SIGNED  Jim L. Jacobs	nd correct	Set @ DATE11-30-82	Ft.
Subsurface Safety Valve: Manu. and Type  18. I hereby certify that the foregoing is true and SIGNED  Jim L. Jacobs  (This	nd correct TITLE Geologist S space for Federal or State office	Set @ DATE11-30-82	Ft.
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