TEST WATER SHUT-OFF FRACTURE TREAT

PULL OR ALTER CASING MULTIPLE COMPLETE

SHOOT OR ACIDIZE

REPAIR WELL

CHANGE ZONES

5 BLM, Fmn 1 SoUnEx 1 File

Form Approved.

UNITED STATES						
DEPARTMENT OF THE INTERIOR						
GEOLOGICAL SURVEY						

SUNDRY NOTICES AND REPORTS ON WELLS

	Budget Bureau No. 42-R1424					
	5. LEASE					
l	NM 24661					
	6. IF INDIAN, ALLOTTEE OR TRIBE NAME					
	7. UNIT AGREEMENT NAME					
	8. FARM OR LEASE NAME					
	_July_Jubilee					
	9. WELL NO.					
	_ 3					
	10. FIELD OR WILDCAT NAME					
Basin Dakota & Bisti Lower G						
_	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA					
	_Sec. 29, T24N, R9W					
	12. COUNTY OR PARISH 13. STATE					
	San Juan I NM					
	14. API NO.					
	15. ELEVATIONS (SHOW DF, KDB, AND WD)					
	6905' GL; 6917' RKB					

(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 Gallup_{gas} well Dakota other 2. NAME OF OPERATOR DUGAN PRODUCTION CORP. 3. ADDRESS OF OPERATOR P O Box 208, Farmington, NM 87499 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 1830' FSL - 880' FWL AT SURFACE: AT TOP PROD. INTERVAL: AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA SUBSEQUENT REPORT OF: REQUEST FOR APPROVAL TO:

RECEIVED

(NOTE: Report results of multiple completion or zone APR 2 0 1984 page on Form 9-330.)

BUREAU OF LAND MANAGEMENT FARMINGTON RESOURCE AREA

ABANDON*
(other) Intention to test additional zone

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.)*

Upon evaluating open holes logs, the Dakota development is poorer than anticipated. Upon testing the Dakota, we plan to perforate, stimulate and test the Gallup interval, approximately 4645 to 5200'.

Should potential be indicated in both zones, we plan to request authorization from NMOCD for downhole commingling. The state of the st

from NMOCD for downhole commingling.

A-6.25:934

Subsurface Safety Valve: Manu. and Ty	ype		Dist, g	Set @ Ft.
18. I hereby dertify that the foregoing SIGNED 1 Jim L	is true and correct		DATE	APPROVED
	(This space for Fed	deral or State office use	e)	
APPROVED BY	TITLE		DATE	APR 23 1984
	P.M.)OC		James & Charles
	*See Instruction	ons on Reverse Side		FARMINGTON RESOURCE AREA