Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

	/ PORM APPROVED	PORM APPROVED			
	Pudget Bureau No. 1004-0135				
_	Expires: March 31, 1993				
J.	Lesse Designation and Serial No.				

NM 54981

SUNDRY NOTICES AND REPORTS ON WELLS	ŀ
rm for proposals to drill or to deepen or reentry to a different reservoir	L

Do not use this form for proposals to Use "APPLICATION F	drill or to deepen or reentry to a different reservoir OR PERMIT—" for such proposals	. If seems, Amortice of Tripe Name
SUBM	IT IN TRIPLICATE	7. If Unit or CA, Agreequat Designation
1. Type of Well Oli		8. Well Name and No.
2. Name of Operator	Sheba Temple 1	
Dugan Production Corp. 3. Address and Telephone No.	9. API Well No. 30-045-26802	
P.O. Box 420, Farmington,	NM 87499 (505) 325-1821	10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey	Under Fruitland	
1850' FSL - 1850' FWL	<u> </u>	11. County or Parish, State
Sec. 30, T24N, R8W, NMPM		San Juan, NM
CHECK APPROPRIATE BOX	((s) TO INDICATE NATURE OF NOTICE, REPO	RT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	
X Notice of Intent	Abandonment	Change of Plans
Π.,	Recompletion	New Construction
L J Subsequent Report	Plugging Back Casing Repair	Non-Routine Fracturing Water Shut-Off
Final Abandonment Notice	Altering Casing	Conversion to Injection
	X Other Test	_ Dispose Water
	all pertinent details, and give pertinent dates, including estimated date of startin	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
This well is capab	le of production. Swab and test	t production.
. I hereby certify that the foregoing is true, and correct	>44.16(DAY,
Signed John Clerach	Tide Operations Manager	5/18/94
(This space for Pederal or State Office use)		
Approved by	Tide	Dels
•• -• -•		
la 18 11 C.C. Cardon (M) probable in a 22 c.C.	Landah and man, and an analysis and an analysi	20 LD 20 COUVE IN
representations as to any matter within its jurisdiction.	knowingly and willfully to make to any department or agency of the United	Stiles in the Chicke of trachent statements

*See Instruction on Reverse Side

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