

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993**SUNDRY NOTICES AND REPORTS ON WELLS**Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT -" for such proposals**SUBMIT IN TRIPLICATE**

## 1. Type of Well

☐ Oil Well    ☒ Gas Well    ☐ Other

## 2. Name of Operator

Dugan Production Corp.

## 3. Address and Telephone No.

P.O. Box 420, Farmington, NM 87499 (505) 325-1821

Location of Well (Footage, Sec., T., R., M., or Survey Description)

790' FNL & 790' FEL (NE/4 NE/4)  
Unit A, Sec. 25, T24N, R9W

## 5. Lease Designation and Serial No.

SF 078860

## 6. If Indian, Allotted or Tribe Name

## 7. If Unit or CA, Agreement Designation

## 8. Well Name and No.

Largo Federal B #90

## 9. API Well No.

30 045 29428

## 10. Field and Pool, or Exploratory Area

Basin Fruitland Coal

## 11. County or Parish, State

San Juan, NM

## 12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

## TYPE OF SUBMISSION

- ☒ Notice of Intent
- ☐ Subsequent Report
- ☐ Final Abandonment Notice

## TYPE OF ACTION

- ☐ Abandonment
- ☐ Recompletion
- ☐ Plugging Back
- ☐ Casing Repair
- ☐ Altering Casing
- ☒ Other Long term shut in
- ☐ Change of Plans
- ☐ New Construction
- ☐ Non-Routine Fracturing
- ☐ Water Shut-Off
- ☐ Conversion to Injection
- ☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)\*

This well is scheduled to be fractured and tested. Completion of the well to this point has not yielded an adequate volume of gas to pay for pipeline installation. After fracturing, operator plans to possibly install artificial lift equipment. Request a long term shut-in until production testing is complete. A completion report is to be filed.

**THIS APPROVAL EXPIRES APR 01 2000**

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

Signed

*John Alexander*  
John Alexander

Title

Vice-President

Date

4/5/99

(This space for Federal or State office use)

Approved by

/S/ Duane W. Spencer

Title

Team Lead, Petroleum Management

Date

APR - 9 1999

Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and wilfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

\*See Instruction on Reverse Side

NMOCB