Form 3160-5

UNITED STATES

PORM APPROVED PORM APPROVED
Budget Bureau No. 1004-0135

| June 1990) | DEPARTMENT OF | DEPARTMENT OF THE INTERIOR | |
|------------------------------------|--|--|--|
| | BUREAU OF LAND | MANAGEMENT | 5. Lease Designation and Serial No. |
| | | | SF 078156-A |
| ; | SUNDRY NOTICES AND | REPORTS ON WELLS | 6. If Indian, Allottee or Tribe Name |
| Do not use this for | in for proposals to drill or to B "APPLICATION FOR PERI | o deepen or reentry to a different reservoir MIT—" for such proposals | |
| | | | 7, If Unit or CA, Agreement Designation |
| | SUBMIT IN TH | RIPLICATE | West Bisti Unit |
| 1. Type of Well Oil Gas Well Well | Other | 问是仍是仍是 | a Well Name and No. West Bisti Unit 163 |
| 2. Name of Operator | | MAY 2 b 1994 | 9. API Well No. |
| Dugan Production Corp. | | | 30-045-05553 |
| 3. Address and Telephone No | 10. Field and Pool, or Exploratory Area | | |
| P.O. Box 4 | Bisti Lower Gallup | | |
| 4. Location of Well (Footage, | 11. County or Parish, State | | |
| | - 660' FWL | | San Juan, NM |
| | 25N, R13W, NMPM | | l |
| 12. CHECK A | PPROPRIATE BOX(s) TO | INDICATE NATURE OF NOTICE, REPOR | T, OR OTHER DATA |
| | UBMISSION | TYPE OF ACTION | |
| | | Abandonment | Change of Plans |
| X Notice of | Intent | Recompletion | New Construction |
| Subsequent Report | | Plugging Back | Non-Routine Fracturing |
| C 3 200sedneu | Keport | Casing Repair | Water Shut-Off |
| Final Abov | rdonmest Natice | Altering Casing | Conversion to Injection |
| | | X Other long-term shut-in | Dispose Water (Note: Report results of multiple completion on Well |
| | | | Completion or Recompletion Report and Log form.) |
| 13. Describe Proposed or Com | pleted Operations (Clearly state all pertinen | st details, and give pertinent dates, including estimated date of starting | any proposed work. If well is directionally drilled, |
| give subsurface location | cas and measured and true vertical depths | for all markers and zones pertinent to this work.)* | |
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| | | _ | |
| | | SME ATTACHED FOR | |
| | | GONDITIONS OF APPROVAL | |
| | | | |
| | | | |
| Well | is capable of pr | oduction. Water production | is too high to |
| W-1 | | ton to re-inject water from | this well with |

allow water flood system to re-inject water from this well with other wells in the field. Will return to production on completion of injection well repairs. Request long term shut-in until that time.

THIS APPROVAL EXPINES THAT 1 7 1995

| 6. I hereby certify that the foregoing is true and correct Signed | Tide Operations Manager | Dote 5/17/94 |
|--|-------------------------|--|
| (This space for Federal or State office use) | Title | MAY 23 1994 |
| Approved by | | A AMAZINIT ARABINIZED |
| | | United States any false, fictitious or fraudulent statements |

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully 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.

UNITED STATES DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT FARMINGTON DISTRICT OFFICE 1235 LA PLATA HIGHWAY FARMINGTON, NEW MEXICO 87401

CONDITIONS OF APPROVAL:

This shut-in approval is contingent upon conducting a casing integrity test by DFC 01 1994. Mark Kelly with the Farmington Office is to be notified at least 48 hours prior to conducting the casing integrity test (505-599-8907). If the casing test fails, you will be required to submit your plans to repair the casing or plug and abandon the well.

Office Hours: 7:45 a.m. to 4:30 p.m.