

**UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY**

SUBMIT IN TRIPPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 42-R1424.

## SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT" for such proposals.)

<b>1. OIL WELL</b> <input type="checkbox"/> <b>GAS WELL</b> <input checked="" type="checkbox"/> <b>OTHER</b> <input type="checkbox"/>		<b>5. LEASE DESIGNATION AND SERIAL NO.</b> <p align="center"><b>NM 25443</b></p>	
<b>2. NAME OF OPERATOR</b> <p align="center"><b>Dugan Production Corp.</b></p>		<b>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</b> 	
<b>3. ADDRESS OF OPERATOR</b> <p align="center"><b>Box 234 Farmington, NM 87401</b></p>		<b>7. UNIT AGREEMENT NAME</b> 	
<b>4. LOCATION OF WELL</b> (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <p align="center"><b>1450' FSL - 1600' FEL</b></p>		<b>8. FARM OR LEASE NAME</b> <p align="center"><b>Red Mac</b></p>	
		<b>9. WELL NO.</b> <p align="center"><b>1</b></p>	
		<b>10. FIELD AND POOL, OR WILDCAT</b> <p align="center"><b>WAW Fruitland PC</b></p>	
		<b>11. SEC., T., R., M. OR BLK. AND SURVEY OR AREA</b> <p align="center"><b>Sec 3 T25N R12W</b></p>	
<b>14. PERMIT NO.</b>		<b>15. ELEVATIONS</b> (Show whether DF, RT, GR, etc.) <p align="center"><b>6228' GR</b></p>	
		<b>12. COUNTY OR PARISH</b> <b>13. STATE</b> <p align="center"><b>San Juan NM</b></p>	

**16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data**

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT ON:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

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

**17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS** (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and 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.)\*

1-27-79

Sand water frac'd perfs 1125-1129 and 1134-1140 by Western Co. w/12,768# 10-20 sand and total of 347 bbls water. Used 30 bbl pad, 310 bbls to treat and 7 bbls to flush all water treated w/ 2-1/2# FR-2 per 1000 gals. Dropped 7 ball sealers in two stages ( 5 and 2 ) - no ball action. Used 457 horsepower. Initial and maximum treating pressure 1100 psi, minimum treating pressure 1050 psi. Ave treating pressure 1050 psi, Ave IR 19 B/M. ISDP 200 psi on vacuum in 6 minutes. Left well shut in two hours. Opened to atmosphere.



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

SIGNED

*Thomas A. Dugan*  
**Thomas A. Dugan**

TITLE

**Petroleum Engineer**

DATE

**11-30-79**

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: