Form 3160-5 . 5 BLM	UNITED STATES 1 Fil	e submit in Triplicate	
	TMENT OF THE INTERI	OR verse alde)	5. LEASE DESIGNATION AND BERIAL NO.
BUR	EAU OF LAND MANAGEMEN	<u> </u>	SF-078388A 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NO	OTICES AND REPORTS (Deponals to drill or to deepen or plug to LICATION FOR PERMIT—" for such p	ON WELLS pack to a different reservoir. poposals.)	T. UNIT AGREEMENT NAME
OIL CAS V			C. URIT AUGUSTANIA
2. NAME OF OPERATOR DUGAN PRODUCTION CORP. 3. ADDRESS OF OPERATOR P.O. Box 5820, Farmington, NM 87499-5820 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface			8. FARM OR LEASE NAME
			Huerfanito
			5
			10. FIELD AND POOL, OR WILDCAT
			Basin Dakota 11. BBC, T, R, M, OR BLK. AND
1190' FSL & 1450' FW	L .		SURVEY OR AREA
			Sec. 10, T26N, R9W, NMPA
14. PERMIT NO.	16. ELEVATIONS (Show whether Di	P, RT, GR, etc.)	San Juan NM
16. Check	Appropriate Box To Indicate N	Nature of Notice, Report, or	Other Data
NOTICE OF IN	TENTION TO:	80855	QUENT REPORT OF:
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING ABANDONMENT®
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING Chang	e of Operator X
REPAIR WELL (Other)	CHANGE PLANS	(Norr: Report result	ts of multiple completion on Well pletion Report and Log form.)
This is notification of Dugan Production C	of Change of Operator frorp. effective 12-1-88.	om Mobil Producing T)	K & NM Inc. to
	Bone i	# 0111/014	
DEC 27 PH 2: 24			VEM
)			
CO DEC		jan171	ଞ ୍ଚ
FARE SAR			
18. I hereby certify that the foregol		Coologist	12-20-88
SIGNED Tim I	acobs TITLE	Geologist	DATE
(This space for Federal or State	office use)		
APPROVED BY	TITLE		ACCEPPED FOR RECORD
CONDITIONS OF APPROVAL,	LE ANI.		JAN 12 1989

See Instructions on Reverse Side

FARMINGTON RESOURCE AREA

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