

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Form approved
Budget Bureau No. 1004-0135
Expires August 31, 1985

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	2. NAME OF OPERATOR DUGAN PRODUCTION CORP.	3. ADDRESS OF OPERATOR P.O. Box 420, Farmington, NM 87499	4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1750' FNL & 950' FWL	5. LEASE DESIGNATION AND SERIAL NO. Jic. Tribal Contract #241	6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla	7. UNIT AGREEMENT NAME	8. FARM OR LEASE NAME Boulder	9. WELL NO. 1	10. FIELD AND POOL, OR WILDCAT Boulder Mancos	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 14, T28N, R1W, NMPM	12. COUNTY OR PARISH Rio Arriba	13. STATE NM
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, CR, etc.) 7358' KB											

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF
FRACTURE TREAT
SHOOT OR ACIDIZE
REPAIR WELL
(Other)

PCLL OR ALTER CASING
MULTIPLE COMPLETE
ABANDON*
CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF
FRACTURE TREATMENT
SHOOTING OR ACIDIZING
(Other) Status

REPAIRING WELL
ALTERING CASING
ABANDONMENT*

(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 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.)*

RECEIVED
MAY 14 1990
OIL CON. DIV.
DIST. 3

We are in the process of negotiating with another operator the sale of this property and request sixty (60) days to attempt to consummate this sale.

JUL 27 1990

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

SIGNED Jim L. Jacobs

TITLE Geologist

DATE 4/27/90

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

*See Instructions on Reverse Side

APPROVED

DATE 4/27/90

Ken Townsend

FOR