

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

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.**WELL COMPLETION OR RECOMPLETION REPORT AND LOG ***

1a. TYPE OF WELL: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> Other _____				5. LEASE DESIGNATION AND SERIAL NO. NM 12030	
b. TYPE OF COMPLETION: NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEP-EN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESER. <input type="checkbox"/> Other _____				6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Dugan Production Corp.				7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P. O. Box 234, Farmington, New Mexico 87401				8. FARM OR LEASE NAME Nassau	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 820' FNL, 1130' FEL At top prod. interval reported below At total depth				9. WELL NO. 5	
14. PERMIT NO. _____ DATE ISSUED _____				10. FIELD AND POOL, OR WILDCAT Wildcat PC	
15. DATE SPUDDED 4-2-73				11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 36, T27N, R12W	
16. DATE T.D. REACHED 4-7-73		17. DATE COMPL. (Ready to prod.) 4-28-73		12. COUNTY OR PARISH San Juan	
18. ELEVATIONS (DF, REB, RT, OR, ETC.)* 6023' GR		19. ELEV. CASINGHEAD		13. STATE N.M.	
20. TOTAL DEPTH, MD & TVD 1560'		21. PLUG, BACK T.D., MD & TVD 1544'		22. IF MULTIPLE COMPL., HOW MANY? →	
23. INTERVALS DRILLED BY 0-1560'		ROTARY TOOLS		CABLE TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 1528-38' Pictured Cliffs				25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN None				27. WAS WELL CORRED None	
28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
5-1/2"	15.5#	80' GR	7-7/8"	12 sacks	None
2-7/8"	6.5#	1556' GR	4-3/4"	75 sacks	None
29. LINER RECORD					
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	
30. TUBING RECORD					
SIZE	DEPTH SET (MD)	PACKER SET (MD)			
1-1/4"	1535' GR				
31. PERFORATION RECORD (Interval, size and number)					
1528-38' One Jet/ft		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. See completion report for detailed frac information.			
33.*					
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping, etc. and type of pump) Flowing			WELL STATUS (Producing or shut-in) Shut-in
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.
5-5-73	3	5/8"	→	—	—
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.
328 SI	410 SI	→	—	918 AOF	—
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)					TEST WITNESSED BY MAY 21 1973
35. LIST OF ATTACHMENTS None					
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records Original signed by T. A. Dugan					
SIGNED Thomas A. Dugan		TITLE Engineer		DATE 5-23-73	

*(See Instructions and Spaces for Additional Data on Reverse Side)

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal land or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

For each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

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 UNITED STATES

Form 9-331
(May 1963)UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on reverse 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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. NM 12030	
2. NAME OF OPERATOR Jerome P. McHugh		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR Box 234, Farmington, New Mexico 87401		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 820' FNL - 1130' FEL		8. FARM OR LEASE NAME Nassau	
14. PERMIT NO.		9. WELL NO. 5	
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 6023' GR		10. FIELD AND POOL, OR WILDCAT Wildcat <i>PC</i>	
		11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA Sec. 36, T27N, R12W	
		12. COUNTY OR PARISH San Juan	13. STATE N.M.

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) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐Change of Operator ☒

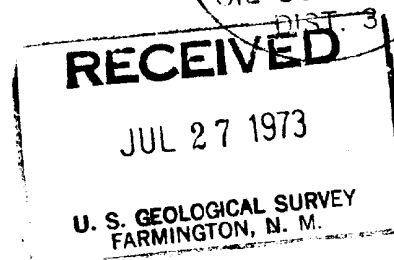
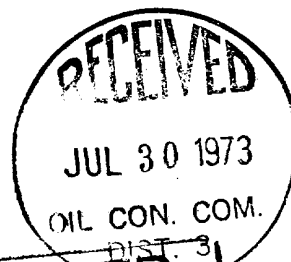
(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

CHANGE OF OPERATOR - Effective July 23, 1973

From: Dugan Production Corp.

To: Jerome P. McHugh



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

Original signed by T. A. Dugan

SIGNED Thomas A. Dugan

TITLE Engineer

DATE 7-23-73

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side