Form 9-331

Form Approved.	
Budget Bureau No.	42

Dec. 1973	Budget Bureau No. 42-R1424
UNITED STATES	5. LEASE
DEPARTMENT OF THE INTERIOR	SF 080238
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
Oo not use this form for proposals to drill or to deepen or plug back to a different eservoir. Use Form 9–331–C for such proposals.)	
servoir. Use Form 9-331-C for such proposals.)	- Or Trittin Off EDIOE TITING
1. oil gas 🔀 other	Gee Gee
2. NAME OF OPERATOR	9. WELL NO.
Dugan Production Corp.	10. FIELD OR WILDCAT NAME
ADDRESS OF OPERATOR	Wildcat
Box 234, Farmington, NM 87401	11. SEC., T., R., M., OR BLK. AND SURVEY OF
LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA (\$23) (1) 2 (4)
below.) 1850' FNL - 1850' FEL	Sec 31 T27N R12W
AT SURFACE: AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE San Juan NMr
AT TOTAL DEPTH:	14. API NO. 12. 14. 15. 15. 15. 15. 15. 15. 15. 15. 15. 15
. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	14. API NO. 1344 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DE KDB AND WD
	15. ELEVATIONS (SHOW DF, KDB, AND WD 5853 GR
EQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	•
EST WATER SHUT-OFF	
HOOT OR ACIDIZE	
EPAIR WELL	(NOTE: Report results of multiple completion or zon
JLL OR ALTER CASING	change on Form 9-330.)
HANGE ZONES	
BANDON*	
other) Well Status	
<ol> <li>DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly statincluding estimated date of starting any proposed work. If well is dimeasured and true vertical depths for all markers and zones pertinent.</li> </ol>	lirectionally drilled, give subsurface locations and
Well is scheduled for further tests and evalu	ations to isolate the gas zones.
	Edward Property Comments
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	1000 G 000
	APR 3 1000
TEMPORARY ABANDONMENT	OIL CON COM
IEMPUKAKI ADAMPUMMAN	DIST. 3
EXPIRES APR 3 1981	
ubsurface Safety Valve: Manu. and Type	Set @F1
igwedge	
3. I hereby certify that the foregoing is true and correct	
GNED Thomas A. Dudan TITLE President	DATE
(This space for Federal or State off	ice use)
	DATE
ONDITIONS OF APPROVAL, IF ANY:	ec
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