1 File

(NOTE: Report

change

Kirby Group

Form Approved.

Form	9-331
Dec	1973

TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE

PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES

Status -

REPAIR WELL

ABANDON*

(other)

UNITED J. ATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

, Budget Bureau No. 42-R1424
5. LEASE NM 0553184
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME Ojo He He
9. WELL NO.
10. FIELD OR WILDCAT NAME WAW - Pictured Cliffs
11. SEC., T., R., M., OR BLK. AND SURVEY OF AREA Sec 32, T27N R13W
12. COUNTY OR PARISH 13. STATE SAN Juan
14. API NO. 75 4 5 7 1965

esults of multiple completion or zone

on Form 9-330.)

to deepen or plug back to a different			
(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME Ojo He He		
1. oil gas XX other	9. WELL NO.		
2. NAME OF OPERATOR DUGAN PRODUCTION CORP.	10. FIELD OR WILDCAT NAME WAW - Pictured Cliffs		
3. ADDRESS OF OPERATOR P O Box 208, Farmington, NM 87401	11. SEC., T., R., M., OR BLK. AND SURVEY OR		
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	Sec 32, T27N R13W		
AT SURFACE: 1848' FSL - 1770' FEL	12. COUNTY OR PARISH 13. STATE NM		
AT TOTAL DEPTH:	14. API NO. 25 4 4 5 4 4 5 4 4 4 4 4 4 4 4 4 4 4 4		
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 6155' GL		
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:			

Per your request

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.)*

U. S. GEULUG, CAL SURVEY

FARMINGTON, N. M.

Per your letter of 4-2-82, plan to do some additional testing on this well, but will have to get partners' approval. If we are able to get this well back on a producing status, will file a new communitization agreement.

If we are unsuccessful in getting well back in a producing capability, then will request permission to plug and abandon.

Subsurface Safety Valve: Manu. and Type _			Set @	Fi
18. I hereby certify that the foregoing is truesigned Jim L. Jacobs	Caalaaiat	DATE _	4-30-82	
ACCEPTED FOR RECOR	his space for Federal or State office use)	DATE		
CONDITIONS OF APPROVAY IT ANY 1982	NWOCC.			.
, FARMINGTON DISTRICT	11111000			