

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☐ gas ☒ other
2. NAME OF OPERATOR
Dugan Production Corp.
3. ADDRESS OF OPERATOR
Box 208, Farmington, NM 87401
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 790' FSL - 2240' FWL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

- REQUEST FOR APPROVAL TO:
- | | |
|----------------------|--------------------------|
| TEST WATER SHUT-OFF | <input type="checkbox"/> |
| FRACTURE TREAT | <input type="checkbox"/> |
| SHOOT OR ACIDIZE | <input type="checkbox"/> |
| REPAIR WELL | <input type="checkbox"/> |
| PULL OR ALTER CASING | <input type="checkbox"/> |
| MULTIPLE COMPLETE | <input type="checkbox"/> |
| CHANGE ZONES | <input type="checkbox"/> |
| ABANDON* | <input type="checkbox"/> |
- (other) Additional Testing

- SUBSEQUENT REPORT OF:

REPORT OF: **RECEIVED**

U. S. GEOLOGICAL SURV
FARMINGTON, N. M.

(NOTE: Report results of multiple completion
change on Form 9-330.)

RECEIVED

NOV 9 - 1981
OIL CON. COM.
DIST. 3

5. LEASE
NM 33040
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Faith
9. WELL NO.
3
10. FIELD OR WILDCAT NAME
WAW Pictured Cliffs
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 18 T27N R13W
12. COUNTY OR PARISH
San Juan
13. STATE
NM
14. API NO.
15. ELEVATIONS. (SHOW DF, KDB, AND WD)
6065' GR

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).*

Request permission to conduct additional swabbing and evaluation. We feel that this well is capable of producing significant quantities of natural gas with more swabbing and testing.

Subsurface Safety Valve: Manu. and Type

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

SIGNED Thomas A. Dugan TITLE Petroleum Engineer DATE 10-28-81

(This space for Federal or State office use)

APPROVED BY (Orig. Sgd.) RAYMOND W. VINYARD TITLE ACTING DISTRICT SUPERVISOR DATE _____
CONDITIONS OF APPROVAL, IF ANY: _____

NMCCG