

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: 990' FSL - 1650' FWL

AT TOP PROD. INTERVAL:

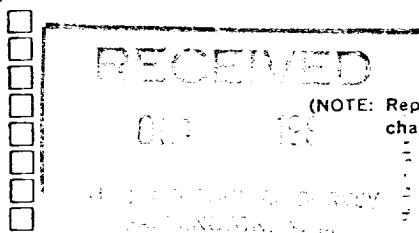
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☒
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:



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

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.)*

Plan to test Fruitland Formation by selectively perforating intervals 1165-1168, 1182-1187, and 1192-1196. If deemed productive, plan to complete well.

Dugan Production is in process of filing AFE's to partner in well.

Subsurface Safety Valve: Make and Type

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

SIGNED Thomas A. Dugan TITLE Petroleum Engineer DATE 10-14-81

(This space for Federal or State office use)

APPROVED BY Dean Elliott TITLE For ACTING SUPERVISOR DATE 10-14-81
CONDITIONS OF APPROVAL, IF ANY:

NMOCC

*See Instructions on Reverse Side