

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 well ☐ gas well ☒ other

2. NAME OF OPERATOR  
Dugan Production Corp.

3. ADDRESS OF OPERATOR  
Box 208, Farmington, NM 87401

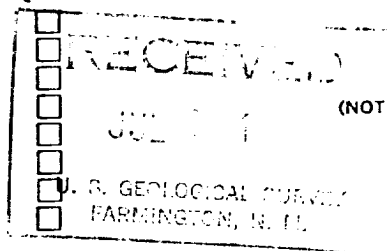
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
980' FSL - 980' FEL  
AT SURFACE:  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

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.)\*

7-23-80

Moved in Morrow Drlg Co. rig. Spudded 8-3/4" hole @ 12:00 noon 7-23-80. Drilled to 87'. Ran 2 jts 7" OD 26# 8R "B" condition csg. TE 85.35' set @ 86' GL. Cemented w/35 sx class "B". POB @2:30 p.m. 7-23-80. Good cement to surface.

7-28-80 TD 1450'

TIH and lay down drill pipe. Rigged up and ran 47 jts 2-7/8" OD 6.5# 10V EUE tbg for csg. TE 1442.02' set @ 1441' GL. Cemented w/75 sx 2% lodense followed by 50 sx class "B". Good mud returns throughout job. (Trace of cement to surface) POB @ 1:00 p.m. 7-28-80. Estimated cement top - 80'.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

Signed ACCEPTED FOR RECORD TITLE Geologist DATE 7-29-80

(This space for Federal or State office use)

APPROVED FED 0 1980 TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

BY FARMINGTON DISTRICT  
BW

NMOCC