

5 BLM, Fmn 1 File

Form Approved.  
Budget Bureau No. 42-R1424

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  
P O Box 208, Farmington, NM 87499
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1850' FSL - 1850' FWL  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:
15. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

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

5. LEASE  
NM 33040
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME  
Faith
9. WELL NO.  
4
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)  
6075' GL; GL = RKB

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

RECEIVED

JUN 08 1984

BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA

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.)\*

We plan to frac this well by 7-15-84.

RECEIVED  
JUN 29 1984  
OIL CON. DIV.  
DIST. 3

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

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

SIGNED Jim L. Jacobs TITLE Geologist DATE 6-5-84

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY \_\_\_\_\_  
(Indicate name of approving official, if any.)

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

JUN 28 1984

INMOCO

FARMINGTON RESOURCE AREA

BY smm