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UNITED STATES DEPARTMENT OF THE INTERIOR

GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

	Budget Bureau No. 42-R1424
	5/ LEASE NM-33022
1	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
\dashv	7. UNIT AGREEMENT NAME
nt	· · · · · · · · · · · · · · · · · · ·
-	8. FARM OR LEASE NAME Hugh Lake
	9. WELL NO. 2
	10. FIELD OR WILDCAT NAME Pictured Cliffs
17	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
.,	Sec. 29, T27N R12W
	12. COUNTY OR PARISH 13. STATE NM
	14. API NO.
Ε,	15. ELEVATIONS (SHOW DF, KDB, AND WD) 5835' GL; GL = RKB
E	
3 8.	(NOTE: Report results of multiple completion or zone
	change on Form 9-330.)
_ SI N.	JRVEY: F
ng	& T. D.
is c	e all pertinent details, and give pertinent dates, lirectionally drilled, give subsurface locations and it to this work.)* ole to 1360' G. L Ran logs.
ru asi the	n casing. Run 64 jts. 2-7/8", ng; T.E. 1362.92' set at 1362' GL, or joint off bottom). Broke circu- % Lodense cement with 1/4# cello-
ft.	Flushed lines, displaced plug

(Do not use this form for proposals to drill or to deepen or plug back to a differe reservoir. Use Form 9–331–C for such proposals.) well XX well other 2. NAME OF OPERATOR DUGAN PRODUCTION CORP. 3. ADDRESS OF OPERATOR P 0 Box 208, Farmington, NM 87499 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 1 1120' FNL - 790' FEL AT SURFACE: AT TOP PROD. INTERVAL: AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTIC REPORT, OR OTHER DATA SUBSEQUENT-RE REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING U. S. GEOLOGICAL MULTIPLE COMPLETE FARMINGTON, CHANGE ZONES ABANDON* 2-7/8" Casi (other) 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly including estimated date of starting any proposed work. If well measured and true vertical depths for all markers and zones pert 6-3-83 T. D. 1360'. Finished drilling 5" Lay down drill pipe and rig up to 6-4-83 6.40#, 10 Rd, NU new tubing for ca with 6 centralizers (1 on every of lation, then pumped 75 sx Class B flake/sx., followed by 50 sx Class Total cement slurry 214 cu. with 8 bbls. water; left 500# pressure on casing. lation throughout job; circ. 1/2 bbl. cement. Job complete at 3:00 p.m. on 6/3/83.

__ Set @ Subsurface Safety Valve: Manu. and Type _____ 18. I hereby certify that the foregoing is true and correct 6-6-83 Geologist Jacobs TITLE _ DATE . (This space for Federal or State office use) DATE _ CONDITIONS OF APPROVAL, IF ANY:

AGGEPTED FOR RECORD

*See Instructions on Reverse Side

JUN 101983