

6 BLM, Fmn

1 Navajo Nation

1 File

1 TR

1 MW

SUBMIT "N DUP" DATE*

Form approved:
Budget Bureau No. 42-R355.6.UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY(See other in-
structions on
reverse side)

5. LEASE DESIGNATION AND SERIAL NO.

20-603-2015

6. INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Pet Inc.

9. WELL NO.

19

10. FIELD AND POOL, OR WILDCAT

Ojo Pictured Cliffs

11. SEC., T., R., M., OR BLOCK AND SURVEY
OR AREA

Sec. 25 T28N R15W

12. COUNTY OR
PARISH
San Juan13. STATE
NM

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____

b. TYPE OF COMPLETION:

NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ 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 and in accordance with any State requirements)*

At surface

1850' FNL - 1850' FEL

At top prod. interval reported below

At total depth

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

DATE ISSUED

5-24-82

15. DATE SPUDDED 6-12-82 16. DATE T.D. REACHED 6-18-82 17. DATE COMPL. (Ready to prod.) 6-22-82 18. ELEVATIONS (DF, RKB, RT, CR, ETC.)* 5680' GL; RKB = GL 19. ELEV. CASINOHEAD 5680'

20. TOTAL DEPTH, MD & TVD 721' 21. PLUG, BACK T.D., MD & TVD 717' 22. IF MULTIPLE COMPL., HOW MANY* 23. INTERVALS DRILLED BY TD 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* C 682-717', Pictured Cliffs 25. WAS DIRECTIONAL SURVEY MADE No

26. TYPE ELECTRIC AND OTHER LOGS RUN

None

27. WAS WELL CORED

No

28. CASING RECORD (Report all strings set in well)

CASINO SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
5-1/2"	14#	102' GL	8-3/4"	30 cf Class B	---
2-7/8"	6.5#	717' GL	4-3/4"	50 cf 59 cf Open Hole Packer @ 682	---

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
None					1 1/4"	653'	682'

31. PERFORATION RECORD (Interval, size and number)

Packer at 682'. Joint below packer
is slotted; cement above packer shoe.

NO perf. slotted liner 682'-717'

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
	None

33. PRODUCTION

33.*

DATE FIRST PRODUCTION		PRODUCTION METHOD (<i>Flowing, gas lift, pumping—size and type of pump</i>)					WELL STATUS (<i>Producing or shut-in</i>)	
10-15-83*		Flowing					SI	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO	
10-15-83	3 hrs	1/2"	→	0	3	0		
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)		
35 psi SI	40 psi SI	→	0	24	0			

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

Vented during test; to be sold.

35. LIST OF ATTACHMENTS

*1st hydrocarbons to well bore; not 1st delivered

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

Jim L. Jacobs

TITLE

Geologist

DATE

NOV 14 1983

*(See Instructions and Spaces for Additional Data on Reverse Side)

NMOCC

FARMINGTON RESOURCE AREA
BY

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. **Items 22 and 24:** If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool. **Item 33:** Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				38. GEOLOGIC MARKERS			
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH
				Pictured Cliffs	650'		

NOV 17 - 1933
LOCAL DIV.
1933