

# OIL CONSERVATION DIVISION

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

WELL APT NO.
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. LG-3736
7. Lease Name or Unit Agreement Name  Com
8. Well No. 1
9. Pool name or Wildcat Basin Fruitland Coal

**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 "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER
2. Name of Operator DUGAN PRODUCTION CORP.
3. Address of Operator P.O. Box 420, Farmington, NM 87499
4. Well Location Unit Letter <u>J</u> : <u>1750</u> Feet From The <u>South</u> Line and <u>1820</u> Feet From The <u>East</u> Line Section <u>2</u> Township <u>29 North</u> Range <u>14 West</u> NMPM <u>San Juan</u> County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) <u>5516' GR</u>

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <u>Plans - Response to BLM Letter *</u> <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

In response to BLM Letter NM-91272(CA), it is intended to fracture treat the Fruitland Coal interval with foam and 36,000# sand. The well will be cleaned out, tubing rerun and the productivity potential evaluated.

**RECEIVED**  
DEC 16 1996

**OIL CON. DIV.**  
DIST. 3

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Gary Brink TITLE Operations Manager DATE 12/13/96

TYPE OR PRINT NAME Gary Brink TELEPHONE NO.

(This space for State Use)

APPROVED BY Johnny Robinson TITLE DEPUTY OIL & GAS INSPECTOR DIST. 3 DATE DEC 16 1996

CONDITIONS OF APPROVAL, IF ANY: