

5 - USGS, Fmn

1 - TR

1 - File

Form 9-331  
Dec. 1973Form Approved.  
Budget Bureau No 42-R1424UNITED 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 ☐ gas ☒ well ☒ other2. NAME OF OPERATOR  
Dugan Production Corp.3. ADDRESS OF OPERATOR  
P O Box 208, Farmington, NM 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 1840' FSL - 790' FWL

AT TOP PROD. INTERVAL: 1755'

AT TOTAL DEPTH: 1870'

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:

<input type="checkbox"/>	1. TEST WATER SHUT-OFF
<input type="checkbox"/>	2. FRACTURE TREAT
<input type="checkbox"/>	3. SHOOT OR ACIDIZE
<input type="checkbox"/>	4. REPAIR WELL
<input type="checkbox"/>	5. PULL OR ALTER CASING
<input type="checkbox"/>	6. MULTIPLE COMPLETE
<input type="checkbox"/>	7. CHANGE ZONES
<input type="checkbox"/>	8. ABANDON*
<input type="checkbox"/>	9. (other)

(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.)\*

Plan to test Pictured Cliffs formation by selectively perforating interval 1730-1735, frac, clean out after frac, run 1½" tubing and complete well.

Will use master valve and stripper head while completing.



Subsurface Safety Valve: Manu. and Type \_\_\_\_\_

Set @ \_\_\_\_\_ Ft.

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

SIGNED Thomas A. Dugan TITLE Petroleum Engineer DATE 10-14-81APPROVED BY Dean Elliott (This space for Federal or State office use)  
TITLES ACTING SUPERVISOR DATE 10-19-81

CONDITIONS OF APPROVAL, IF ANY:

M2

NMOCC

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**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 ☐ other2. NAME OF OPERATOR  
Dugan Production Corp.3. ADDRESS OF OPERATOR  
P O Box 208, Farmington, NM 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 1840' FSL - 790' FWL

AT TOP PROD. INTERVAL: 1755'

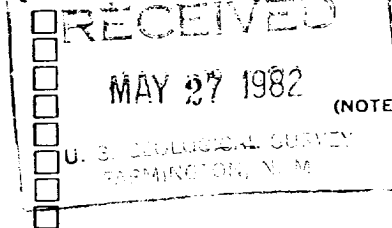
AT TOTAL DEPTH: 1870'

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.)

5. LEASE  
NM 030555A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Dare Devil9. WELL NO.  
#210. FIELD OR WILDCAT NAME  
Undesignated Fruitland11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec 10 T30N R13W12. COUNTY OR PARISH  
San Juan13. STATE  
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
5720' GL

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.)\*

Request permission to selectively perforate Fruitland Formation from 1302-1314'. If deemed productive, plan to complete well.



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

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

SIGNED Sherman E. Dugan TITLE Agent DATE 5-27-82

Sherman E. Dugan

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE JUN 01 1982

CONDITIONS OF APPROVAL, IF ANY:

NMCC