

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

RECEIVED
BLM NM 19163

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—" for such proposals.)

91 APR -9 AM 11:34

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR DUGAN PRODUCTION CORP.		8. FARM OR LEASE NAME Turk's Toast	
3. ADDRESS OF OPERATOR P.O. Box 420, Farmington, NM 87499		9. WELL NO. 1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 790' FSL & 790' FWL		10. FIELD AND POOL, OR WILDCAT Basin Dakota	
14. PERMIT NO. API# 30-045-25430		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 18, T30N, R14W, NMPM	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5522' GL		12. COUNTY OR PARISH San Juan	
		13. STATE NM	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) Complete New Zone	XX

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other)	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

Operator intends to complete Gallup formation as follows:

1. Set cast iron bridge plug above Dakota perforations.
2. Perforate Gallup interval 4759 - 5196.
3. Evaluate Gallup production and possibly stimulate.
4. Apply to commingle Gallup with Dakota.

RECEIVED
MAY 16 1991
OIL CON. DIV.;
DIST. 3

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

SIGNED John Alexander TITLE Petroleum Engineer

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

APPROVED

DATE 4-8-91

MAY 10 1991

DATE

AREA MANAGER
FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side