

5 BLM

UNITED STATES 1 File  
DEPARTMENT OF THE INTERIOR

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

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

1 Celsius-Denver BUREAU OF LAND MANAGEMENT 1 Celsius-SLC

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.)

1. OIL WELL ☐ GAS WELL ☒ OTHER ☐

RECEIVED

2. NAME OF OPERATOR  
DUGAN PRODUCTION CORP.

SEP 4 1985

3. ADDRESS OF OPERATOR  
P O Box 208, Farmington, NM 87499

BUREAU OF LAND MANAGEMENT

4. LOCATION OF WELL (Report location clearly and in accordance with applicable State requirements.)  
See also space 17 below.)  
At surface

990' FSL - 890' FEL

FARMINGTON RESOURCE AREA

14. PERMIT NO.

15. ELEVATIONS (Show whether OF, BT, GR, etc.)

5448' GL; 5460' RKB

5. LEASE DESIGNATION AND SERIAL NO.

NM 16765

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Nice

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Basin Dakota

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

Sec. 7, T30N, R14W, NMPM

12. COUNTY OR PARISH 13. STATE

San Juan

NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

Amendment to APD

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(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.)\*

Please note the following change to the Operations Plan (Exhibit B) of our APD for the Nice #1 (approved July 30, 1985):

WELLHEAD EQUIPMENT: Casinghead - 8-5/8" x 4-1/2" - 2000# working pressure  
screwed wellhead  
Tubinghead - 4-1/2" x 2-3/8" - 2000# working pressure  
screwed

VERBAL APPROVAL OBTAINED FROM KEN TOWNSEND on 8-30-85.

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

SIGNED

JIM L. JACOBS

TITLE

Geologist

DATE

9-3-85

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD  
DATE

\*See Instructions on Reverse Side

NMOCC