

5 BLM 1 File  
**UNITED STATES**  
**DEPARTMENT OF THE INTERIOR**  
**BUREAU OF LAND MANAGEMENT**

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

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

**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. <b>OIL WELL</b> <input type="checkbox"/> <b>GAS WELL</b> <input checked="" type="checkbox"/> <b>OTHER</b>		5. <b>LEASE DESIGNATION AND SERIAL NO.</b> <b>NM 55114</b>
2. <b>NAME OF OPERATOR</b> <b>DUGAN PRODUCTION CORP.</b>		6. <b>IF INDIAN, ALLOTTEE OR TRIBE NAME</b>
3. <b>ADDRESS OF OPERATOR</b> <b>P.O. Box 208, Farmington, NM 87499</b>		7. <b>UNIT AGREEMENT NAME</b>
4. <b>LOCATION OF WELL</b> (Report location clearly and in accordance with any State requirements.* See also space 17 below.) <b>At surface</b> <b>1850' FNL &amp; 1850' FEL</b>		8. <b>FARM OR LEASE NAME</b> <b>Gibraltar</b>
14. <b>PERMIT NO.</b>		9. <b>WELL NO.</b> <b>1</b>
15. <b>ELEVATIONS</b> (Show whether OF, TO, OR, etc.) <b>5596' GL</b>		10. <b>FIELD AND POOL, OR WILDCAT</b> <b>Wildcat - FR/PC</b>
		11. <b>SRC, T, R, M, OR BEK. AND SURVEY OR AREA</b> <b>Sec. 9, T30N, R14W, NMPM</b>
		12. <b>COUNTY OR PARISH</b> <b>San Juan</b>
		13. <b>STATE</b> <b>NM</b>

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <b>Plugged Back</b>	
(Other) <input type="checkbox"/>		(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.)\*

Rigged up Cementers Inc. Squeezed perms 1125-35' and 1144-50 with 25 sx (29.5 cf) class "B" neat cement. Displaced with 6.25 bbls water.

RECEIVED  
BLM MAIL ROOM  
88 APR -7 PM 1:12  
FARMINGTON RESOURCE AREA  
FARMINGTON, NEW MEXICO

RECEIVED  
APR 13 1988  
OIL CON. DIV.  
DIST. 3

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

SIGNED

**Jim L. Jacobs**

TITLE

**Geologist**

DATE **4-6-88**

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

DATE **APR 07 1988**

FARMINGTON RESOURCE AREA

BY **10/1**

NMOCO

\*See Instructions on Reverse Side