1	Submit 3 Copies to Appropriate District Office	State of New Me Energy, Minerals and Natural Re		/	Form C-103 Revised 1-1-89	
	<u>DISTRICT I</u> P.O. Box 1930, Hobbs, NM 88240	OIL CONSERVATION P.O. Box 208	38	WELL API NO. 30 045 30558	· · · · · · · · · · · · · · · · · · ·	
	P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico	878977	5 Indicate Type of Lease	TEX FEE	
	DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410		MAR 2001	6. State Oil & Gas Lease No. LG-3045		
	(DO NOT USE THIS FORM FOR PRODIFFERENT RESER	CES AND REPORTS ON PEL POSALS TO DRILL OR TO DESPIN VOIR. USE "APPLICATION FOR SE 101) FOR SUCH PROPOSALS.)	OPERATOR TO A	7. Lease Name or Unit Agre	ement Name	
	1. Type of Well: OIL GAS WELL WELL XX	OTHER	CESTER 11 1997	Bi-Knobs		
İ	2. Name of Operator			8. Well No.		
	Dugan Production Conp. 3. Address of Operator	1.	<u> </u>	9. Pool name or Wildcat		
		gton, NM 87499-0420	(505)325-1821	Twin Mounds Fru	itland PC	
+	4. Well Location	19 con; 141 07 433 - 0 420	(000)020 1022			
	Unit Letter C :116	O Feet From The North	Line and1650	Feet From The	West Line	
	Section 32	Township 30N Ra		NMPM San Juan	County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 5392 GL						
Ľ	11. Check A	Appropriate Box to Indicate I	Nature of Notice, Re	port, or Other Data		
	NOTICE OF INT	ENTION TO:	SUB	SEQUENT REPOR	T OF:	
F	PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERIN	G CASING	
7	TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. PLUG AN	ID ABANDONMENT	
	PULL OR ALTER CASING		CASING TEST AND CE	MENT JOB		
(OTHER:		отнея: Producti	on casing		
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.						
	Drill to TD 940' on $3/2/01$. Ran $4\frac{1}{2}$ " 10.5 lb/ft Tex tube casing. Cement with 103 cu ft Class "B" containing 2% Lodense and $1/4$ lb/sx celloflake. Tail with 59 cu ft containing $1/4$ lb/sx celloflake. Circulate 7 bbls cement. Job complete $3/3/01$.					
_						
	I hereby certify that the information above is true	and complete to the best of my knowledge and	beid. Fnaineer		3/6/01	

The space for State Use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

The space for State Use and complete to the best of my knowledge and belief.

Engineer

TITLE

Engineer

DATE 3/6/C1

TITLE

DATE 3/6/C1

TITLE

MAR - 8 2001

DATE 4 APPROVAL IF ANY: