

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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

Form approved,  
Budget Bureau No. 42-R1424.

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>                                               |  | 5. LEASE DESIGNATION AND SERIAL NO.<br>14-20-604-84                     |  |
| 2. NAME OF OPERATOR<br>Thomas A. Dugan                                                                                                                         |  | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME<br>Ute Mountain                    |  |
| 3. ADDRESS OF OPERATOR<br>Box 234, Farmington, NM 87401                                                                                                        |  | 7. UNIT AGREEMENT NAME<br>Tenneco Ute                                   |  |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*<br>See also space 17 below.)<br>At surface<br>640' FNL - 540' FEL |  | 8. FARM OR LEASE NAME<br>Tenneco Ute                                    |  |
| 14. PERMIT NO.                                                                                                                                                 |  | 9. WELL NO.<br>2X                                                       |  |
| 15. ELEVATIONS (Show whether DF, RT, CR, etc.)<br>5580' GR                                                                                                     |  | 10. FIELD AND POOL, OR WILDCAT<br>Verde Gallup                          |  |
|                                                                                                                                                                |  | 11. SEC. T., R., M., OR BLK. AND<br>SURVEY OR ARBA<br>Sec. 30 T31N R14W |  |
|                                                                                                                                                                |  | 12. COUNTY OR PARISH<br>San Juan                                        |  |
|                                                                                                                                                                |  | 13. STATE<br>NM                                                         |  |

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) <input type="checkbox"/>               |                                                 |
| (Other) <input type="checkbox"/>             |                                               | (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.)\*

Laid down tbg and rods

2-22-71 Spotted 35 sx cement plug 3800 to 3550'  
Shot off 5-1/2" csg @ 1620' - Laid down csg.

2-23-71 Spotted 35 sx plug 1650 to 1550  
Spotted 20 sx plug bottom of surface csg  
Erected dry hole marker

1975 Cleaned up location

Sept 1978 Planted grass

RECEIVED

FEB 28 1984

OIL CON. DIV.  
DIST. 3

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

SIGNED

Thomas A. Dugan

TITLE

Petroleum Engineer

DATE

12-20-78

(This space for Federal or State office use)

David J. Miller

APPROVED BY

TITLE

DATE

FEB 24 1984

CONDITIONS OF APPROVAL, IF ANY:

COPY TO ROSWELL

\*See Instructions on Reverse Side

UNO 02