

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

5. LEASE DESIGNATION AND SERIAL NO.

14-20-603-326

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo

7. UNIT AGREEMENT NAME

Central Bisti Lower
Gallup Unit

8. FARM OR LEASE NAME

9. WELL NO.

35

10. FIELD AND POOL, OR WILDCAT

Bisti Lower Gallup

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

Sec. 9, T25N, R12W

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

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 ☐

2. NAME OF OPERATOR

Hixon Development Company

3. ADDRESS OF OPERATOR

P.O. Box 2810, Farmington, New Mexico 87499

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

660' FSL, 1980' FWL, Section 9, T25N, R12W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6225' DF

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐

PCLL OR ALTER CASING

☐

FRACTURE TREAT

☐

MULTIPLE COMPLETION

☐

SHOOT OR ACIDIZE

☒

ABANDON*

☐

REPAIR WELL

☐

CHANGE PLANS

☐

(Other)

☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐

REPAIRING WELL

☐

FRACTURE TREATMENT

☐

ALTERING CASING

☐

SHOOTING OR ACIDIZING

☐

ABANDONMENT*

☐

(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.)*

In addition to work described in our Sundry Notice dated 1/25/84 we plan to reopen perforations previously squeezed (4647' - 58', 4748' - 60', 4777' - 84', 4796' - 4804', 4820' - 26' and 4838' - 44').

Submit Completion Report, Form 3160-4 (Formerly 9-330), upon completion of proposed operations

RECEIVED

RECEIVED
SEP 20 1984
OIL CON. DIV.
DIST. 3

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

SIGNED

David S. Butcher

TITLE Petroleum Engineer

DATE September 19, 1984

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

SEP 29 1984
John T. Miller
M. MILLENBACH
AREA MANAGER

*See Instructions on Reverse Side