

**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SF 078056

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Hixon Development Company		8. FARM OR LEASE NAME Federal "C"
3. ADDRESS OF OPERATOR P. O. Box 2810, Farmington, New Mexico		9. WELL NO. 3
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FNL, 1980' FWL		10. FIELD AND POOL, OR WILDCAT Undesignated-PC
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 5-T25N-R12W
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6145' GLE		12. COUNTY OR PARISH San Juan
		13. STATE New Mexico

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 type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Completion</u>	<input checked="" type="checkbox"/>

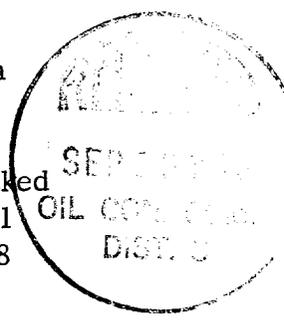
(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

7/26/76 Move in workover unit. Ran bit and scraper in 5 1/2" 14 # J-55 casing.

7/27/76 Rigged up Dowell. Spotted a 220' cement plug inside casing across Lower Gallup perforations. Rigged up McCullough Services. Set wire-line CIBP @ 1305'. Pressure tested casing. Perforated casing 4-JSPF @ 1210' w/4" Omega Jet hollow carrier gun. Set Baker Model K CICR @ 1177' w/2 3/8" 4.7# EUE tubing. Rigged up Dowell, established circulation to surface. Pumped 160 sx Class A cement w/6% gel and 2% CaCl. Good returns throughout cement job. Stung out of retainer, pulled tubing. WOC.

7/28/76 Rigged up McCullough Services. Ran Gamma Ray-Collar Correlation and Cement Bond Log. CBL showed cement top @ 664'. Picked up Baker Model AD-1 tension packer and seating nipple. Set bottom of packer @ 1091'. Swabbed tubing dry to perforate underbalanced. Picked up lubricator and tubing strip gun. Perforated Pictured Cliffs interval correlating to 1125'-1135' on the Schlumberger IES Log dated 7/13/58 w/2-JSPF (total 20 shots). Ran in hole w/swab. Tubing was dry.



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

SIGNED [Signature] TITLE Petroleum Engineer DATE 9-3-76

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

