

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

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal "C"

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

WAW-Fruitland-PC Ext.

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

Sec. 5-T25N, R12W

12. COUNTY OR PARISH

San Juan

13. STATE

NM

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
Hixon Development Company

3. ADDRESS OF OPERATOR
P.O. Box 2810, Farmington, New Mexico 87401

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, Unit C, Section 5, T25N, R12W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
6145 GLE

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) _____	(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.)*

The subject well was plugged and abandoned 7-14-79 through 7-16-79 as follows: A) Fill hole with 9#/gallon mud. Spot cement plug 1200'-763'. Squeezed perforations 1125'-35'. B) Spotted 25 sack plug from 215' to surface. Cut off well head assembly 3' below GL. Set regulation dryhole marker. Well plugged and abandoned 7-16-79. Location will be ready for inspection by 8-15-79.

RECEIVED
DEC 17 1984
OIL CON. DIV.
DIST. 3
JUL 23 1979
U. S. GEOLOGICAL SURVEY

18. I hereby certify that the foregoing is true and correct
SIGNED [Signature] TITLE Petroleum Engineer DATE 7-19-79

APPROVED
AS AMENDED

APPROVED BY _____ TITLE _____ DATE 1-2-1984

Approved as to plugging of the well bore
Liability under bond is retained until
surface restoration is completed.

NMOCC
: Instructions on Reverse Side

M. MILLENBACH
AREA MANAGER