

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPlicate  
(Other instructions on re-  
verse side)

For use by  
Bureau of Land Management  
Budget Bureau No. 42-R142

5. LEASE DESIGNATION AND SERIAL NO.

NM 25445

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Hixon Development Company		8. FARM OR LEASE NAME Black Hill Mesa	
3. ADDRESS OF OPERATOR P.O. Box 2810, Farmington, New Mexico 87401		9. WELL NO. 1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  1650' FNL, 1650' FEL, Section 17, T25N, R12W		10. FIELD AND POOL, OR WILDCAT Bisti Lower Gallup	
14. PERMIT NO.		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA 17-25N-12W	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6264' GLE		12. COUNTY OR PARISH San Juan	
		13. STATE NM	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <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.)\*

Run 4938.72' 10.5# and 9.5# casing to 4952' KB. Cemented with 200 sacks Class B 50-50 Pozmix with 2% gel, 2% CaCL, 10#/sack Kolite. Followed with 150 sacks Class B 2% CaCL cement. Displaced with 79 BW. Good returns throughout cement job. Did not circulate cement to surface. Cement top is 3774'. Perforated 4 intervals 4818'-20', 4831'-41', 4850'-60', 4863'-76' (39 shots). Acidize with 500 gallons and fraced with 60,000# 20-40 sand and 1100 bbl oil.

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

SIGNED

*[Signature]*

TITLE Petroleum Engineer

DATE April 15, 1982

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD

4M000

APR 19 1982

\*See Instructions on Reverse Side

FARMINGTON DISTRICT

BY

*[Signature]*