

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Form approved.
Bureau No. 42 R1424.
LEASE DESIGNATION AND SERIAL NO.

SE 078064

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.)

RECEIVED
JAN 7 1983

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

1620' FSL, 1630' FEL, Section 13, T25N, R12W

14. PERMIT NO.

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

6405' KB

UNIT AGREEMENT NAME

Carson Unit

8. FARM OR LEASE NAME

9. WELL NO.

203

10. FIELD AND POOL, OR WILDCAT

Pictured Cliffs

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

Section 13, T25N, R12W

12. COUNTY OR PARISH 13. STATE

San Juan

NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other) Test Well

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

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

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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.) *

Hixon Development Company plans to swab test the above captioned well. Further action will depend on the results of testing.

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

SIGNED

Leslie C. Cullen

TITLE Petroleum Engineer

DATE 1/5/83

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED
AS AMENDED

JAN 11 1983

JAMES F. SIMS
DISTRICT ENGINEER

*See Instructions on Reverse Side