

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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' FNL, 1980' FEL, Sec. 7, T 25N, R 12W

14. PERMIT NO. _____

15. ELEVATIONS (Show whether of, or from, _____)
6251' GR

5. LEASE DESIGNATION AND SERIAL NO.
SF 078056

6. IF INDIAN, ALLOTTEE OR TRIBE NAME _____

7. UNIT AGREEMENT NAME
Central Bisti Unit

8. FARM OR LEASE NAME _____

9. WELL NO.
WI-75

10. FIELD AND POOL, OR WILDCAT
Bisti Lower Gallup

11. SEC., T., R., M., OR BLK. AND SURVEY OF AREA
Sec. 7, T 25N, R 12W

12. COUNTY OR PARISH 13. STATE
San Juan New Mexico

RECEIVED
JAN 14 1987

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>Convert to Water Injection</u> <input checked="" type="checkbox"/>	

(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 preparing this well for inclusion in our existing water flood the subject well was cleaned out and the Gallup perforations (4832'- 4846') were acidized with 750 gallons of 15% HCL acid. The Gallup Zone of this well was then placed on injection with a packer set at 4760' K.B. This well has been approved for water injection by the New Mexico Oil Conservation Commission under Rule R1414.

RECEIVED
JAN 26 1987
OIL CON. DIV
DIST. 3

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

SIGNED Bruce E. Deventhal TITLE Petroleum Engineer ACCEPTED FOR RECORD 1987

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE JAN 23 1987

CONDITIONS OF APPROVAL, IF ANY: _____

FARMINGTON RESOURCE AREA
BY Sam

*See Instructions on Reverse Side

NMOC