

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, NM 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, Section 27, T25N, R12W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
6338' GLE

5. LEASE DESIGNATION AND SERIAL NO.  
14-20-5579

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
Allotted

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Polly Turpin

9. WELL NO.  
1

10. FIELD AND POOL, OR WILDCAT  
Bisti Lower Gallup

11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA  
Sec. 27, T25N, R12W

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:

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"/>		<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) <u>Drilling Program</u>	<input type="checkbox"/>		<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.)\*

Spudded well at 2:00 PM on 4/13/85. Drill 12-1/4" hole to 280' K.3. Ran 6 joints (266.94') of 8-5/8", 24#, J-55, 8 rd, ST & C surface casing. Welded Cement Nosed Guide Shoe to 1st joint. Ran centralizers on top of 1st and 3rd joints. Set casing at 280' K.B. and cemented with 150 sks (177 cu.ft.) Class "B" cement containing 2% CaCl. Displaced cement 30' short of shoe with 16 BW. Circulated 4 bbls of cement to pit. Shutdown and WOC 12 hours.

RECEIVED

APR 16 1985

BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA

ACCEPTED FOR RECORD

APR 22 1985

FARMINGTON RESOURCE AREA

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

SIGNED Bruce P. DeBenthall TITLE Petroleum Engineer

DATE April 17, 1985

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

\*See Instructions on Reverse Side