

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 <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 Tim Hixon	
3. ADDRESS OF OPERATOR P.O. Box 2810, Farmington, New Mexico		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 2310' FSL, 2310' FEL, Section 27, T 25N, R 12W		10. FIELD AND POOL, OR WILDCAT Bisti Lower Gallup	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 27, T 25N, R 12W	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6339' GLE		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 PLANE	<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 checked="" type="checkbox"/>
(Other)	<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.)*

Pressure tested 8-5/8" surface casing and BOP. Drilled out from under surface with 7-7/8" bit. Drilled 7-7/8" hole to T.D. of 4925'. Ran Induction Log and Compensated Density Dual Spaced Neutron Log.
Formation tops as follows: Fruitland Coal-1080', Pictured Cliffs-1090', Cliffhouse-1849', Menefee-2460', Point Lookout-3500', Mancos Shale-3652', Upper Gallup-4576', Lower Gallup-4672'.

Received verbal approval from BLM on 5/21/85 to Plug and Abandon well. Set the following cement plugs using Class "B" cement per BLM instructions. Placed cement plug across Upper Gallup from 4526'-4626' using 30 sks (35 cu.ft.) of cement. Placed cement plug across Cliffhouse from 1799'-1899' using 30 sks (35 cu.ft.) of cement. Placed cement plug across Pictured Cliffs and Fruitland from 1030'-1140' with 35 sks (41 cu.ft.) of cement. Placed cement plug across 8-5/8" surface casing shoe from 206'-306' using 30 sks (35 cu.ft.) of cement. Placed cement plug across top of surface casing from 100'-0' with 30 sks (35 cu.ft.) of cement. Installed regulation dry hole marker on 5/24/85.

Please Submit Completion Report

CONFIDENTIAL

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

SIGNED Bruce C. Dehenthal TITLE Petroleum Engineer DATE MAY 31 1985

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

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

Instructions on Reverse Side

NMOCC