Form 3160-5 (November 1983) (Formerly 9-331)	(Other instructions on					5. LEASE DESIGNATION AND SERIAL NO. SF 078064			
		OTICES AND R oposals to drill or to de LICATION FOR PERMIT	epen or plug bac —" for such prop	k to a different reset off		IF INDIAN, ALLO	TTEE OR TRIBE NAME		
OIL GAS WELL THER 90 JAN 12 AM 11:50						7. UNIT AGREEMENT NAME			
2. NAME OF OPERATOR						8. FARM OR LEASE NAME			
Hixon Development Company						Pete Morrow			
3. ADDRESS OF OPERATOR						9. WBLL NO.			
P.O. Box 2810, Farmington, New Mexico 87499						İ 2			
4. Location of well (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1650' FNL, 1975' FEL, Sec. 1, T25N, R12W						10. FIELD AND POOL, OR WILDCAT Basin Fruitland Coal			
									11. SEC., T., B., M., OR BLK. AND SURVEY OR ARMA
						API # 30-045-27545			
14. PERMIT NO. 15. BLEVATIONS (Show whether DF, RT, GR, etc.)				GR, etc.)		COUNTY OR PAR			
		6275' GLE				an Juan	New Mexico		
16.	Check	Appropriate Box To	Indicate Nat	ure of Notice, Report, o	Othe	r Data			
NOTICE OF INTENTION TO: SUBSEQUE						REPORT OF:			
TEST WATER SHUT-OF	F	PULL OR ALTER CASIN	rg	WATER SHUT-OFF		REPAIRIN	G WIET.T.		
FRACTURE TREAT		MULTIPLE COMPLETE		FRACTURE TREATMENT		ALTERING			
SHOOT OR ACIDIZM		ABANDON*		SHOOTING OR ACIDIZING					
REPAIR WELL		CHANGE PLANS		(Other) Drilling	Prog	ABANDONMENT*			
(Other)	(Note: Report result						s of multiple completion on Well detion Report and Log form.)		
Spudd hole casin Mixed conta	ed surfacto 134' g. Cas and puring 2	ace at 9:30 a Ran 3 jts ing set at 132 mped 60 sks. (m. on Janua (131.50') c .5'. Cemer 70.8 cu. ft	etails, and give pertinent days and measured and true versary 5, 1990. Drill of 7", 23#, K-55, ated casing as folt.) of Class "B" of lophane flakes.	led 8	pths for all mark 8-3/4" LT&C :	date of starting any ters and zones perti-		
				ŗ u u F	EB0	5 1990 N. DIV.	ש		

18. I hereby certify that the foregoing is true and correct SIGNED Delventhal (This space for Federal or State office use) APPROVED BY _____CONDITIONS OF APPROVAL, IF ANY: TITLE . JAN 60 480 WALCO

*See Instructions on Reverse Side

BY __