

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

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

5. LEASE DESIGNATION AND SERIAL NO.

NOO-C-14-20-5245

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Joe Canuto, Jr.

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

East Bisti Coal 21

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Basin Fruitland Coal

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

Sec. 21, T25N, R11W

12. COUNTY OR PARISH 13. STATE

San Juan

N.M.

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, N.M. 87499
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
900' FNL, 900' FEL, Sec. 21, T25N, R11W
14. PERMIT NO. 15. ELEVATIONS (Show whether OF, RT, GR, etc.)
6453' GLE

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRAC TREATMENT

MULTIPLE COMPLETION

FRAC TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIRING WELL

CHANGE LOG

(Other)

APD Amendment

X

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

17. * (If well is directional, pulled, gas, abandoned, etc.) Name and measured and true vertical depths for all markers and zones per-
tinent to the work.

Please accept this sundry as an amendment to the Application
for Permit to Drill for the above referenced well.

Production casing will be 4-1/2", 9.5#, J-55, ST&C, Range 3,
Smls.

Attached are an amended Pressure Control Equipment Schematic
and Drilling Rig Location Plat.

RECEIVED

JUL 19 1990

OIL CON. DIV.
DIST. 3

18. SIGNATURE OF OPERATOR (If well is directional, pulled, gas, abandoned, etc.)

SIGNATURE

Aldrich L. Kuchera

(This space for Federal or State office use)

President

APPROVAL BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

NMOCD

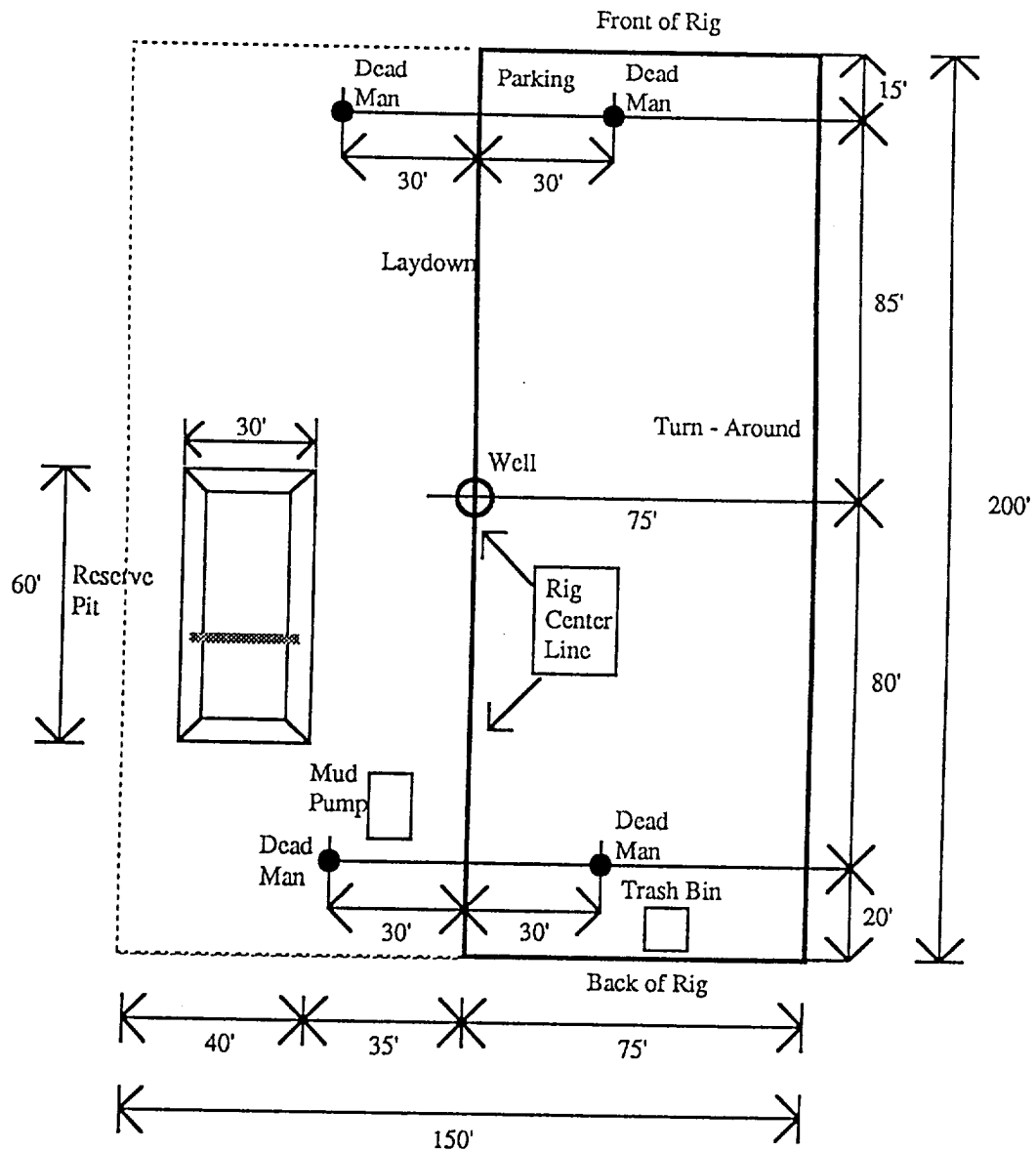
*See Instructions on Reverse Side

DATE

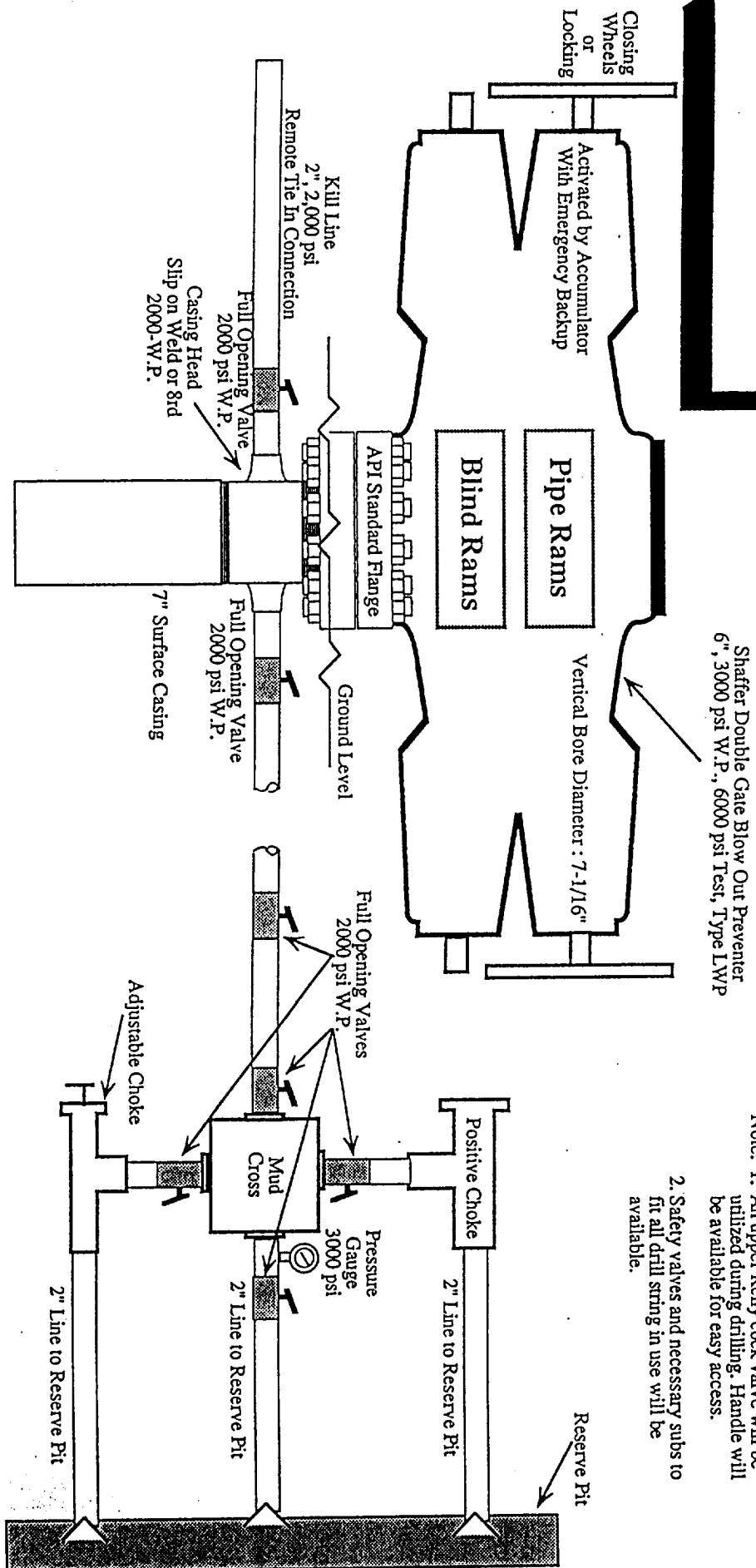
JUN 19 1990

DATE

Hixon Development Company Drilling Rig Location Plat



Hixon Development Company Pressure Control Equipment



- Note: 1. An upper Kelly cock valve will be utilized during drilling. Handle will be available for easy access.
2. Safety valves and necessary subs to fit all drill string in use will be available.