

November 1983)
Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

STANDARD FORM NO. 100-108 (Other Instructions on reverse side)

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
Hicks Oil & Gas, Inc.

3. ADDRESS OF OPERATOR
P.O. Drawer 3307 - 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
1920' FSL & 2120' FEL

5. LEASE DESIGNATION AND SERIAL NO.
NM 09979

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
S. E. Cha Cha

8. FARM OR LEASE NAME

9. WELL NO.
24

10. FIELD AND POOL, OR WILDCAT
Cha Cha Gallup

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC. 15, T28N, R13W

12. COUNTY OR PARISH
San Juan

13. STATE
NM

14. PERMIT NO.

15. ELEVATIONS (Show 6092' KB)

RECEIVED
AUG 05 1985

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

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 PLANE <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(Other) Put back on Production

(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.)
- Clean out to PBSD
 - Acidize with 500 gallons of 7½% HCL acid.
 - Swab test
 - Put back on production

AUG 07 1985
OIL CON. DIV.
DIST. 3

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

SIGNED Mike Hicks TITLE President/Hicks Oil & Gas DATE 8-1-85

Mike Hicks

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE AUG 06 1985

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

Handwritten mark

*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA
BY SMM

NMDC