Form 3160-5
(June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.

NMSF-077976

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

S.E. CHA CHA

1. Type of Well
   [X] Oil Well   [ ] Gas Well   [ ] Other

2. Name of Operator
   HICKS OIL & GAS, INC.

3. Address and Telephone No.
   PO Drawer 3307, Farmington, NM 87499   505/327-4902

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

   1980'FNL & 1980'FWL
   Section 17, T28N-R13W

8. Well Name and No.

S.E. CHA CHA #15

9. API Well No.
   30-045-07467

10. Field and Pool, or Exploratory Area
    CHA CHA GALLUP

11. County or Parish, State
    SAN JUAN COUNTY

12.   CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	
[X] Notice of Intent	[ ] Abandonment	[ ] Change of Plans
	[ ] Recompletion	[ ] New Construction
[ ] Subsequent Report	[ ] Plugging Back	[ ] Non-Routine Fracturing
	[ ] Casing Repair	[ ] Water Shut-Off
[ ] Final Abandonment Notice	[ ] Altering Casing	[ ] Conversion to Injection
	[X] Other Well Service	[ ] Dispose Water

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

13. 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.)*

HICKS OIL & GAS plans on repairing subject well and returning it to
production.

2005 APR 15 AM 11 58
070 FARMINGTON NM
RECEIVED

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

Signed _____ , JIM HICKS   Title President   Date 4/13/05

(This space for Federal or State office use)

Approved by Original Signed: Stephen Mason   Title _____   Date APR 18 2005
Conditions of approval, if any:

*See Instruction on Reverse Side