UMITED STATES

DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

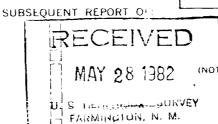
	January Carlos Commence &								
	5. 11.6 y SF 077:161								
	6. IF INDIAN, ALLOTTEE OR TRIBE NAME								
	7. UNIT AGREEMENT NAME								
t .	SOUTHEAST CHA CHA UNIT 8. FARM OR LEASE NAME								
	9. WELL NO. 4								
	10. FIELD OR WILDCAT NAME								
7	CHA CHA GALLUP 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 9 T28N - R13W								
	12. COUNTY OR PARISH 13. STATE San Juan New Mexico 14. API NO.								
-,	15. ELEVATIONS (SHOW DF, KDB, AND WD)								

SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a difference reservoir. Use Form 9–331–C for such proposals.)

1.	oil well		gas well		other	Operator	Name	Char.ge	
2. H	NAM lick	E OF C s Oil	PERAT	TOR	lnc.	and prompty and the statement of the sta			
F	0.0.		:74,	Fai	rmingt	on, N.M.			
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) \(\frac{8}{l} \) \(\frac{1}{818} \) from South line AT TOP PROD. INTERVAL: 660' from Westline AT TOTAL DEPTH:									
16.		CK APP				INDICATE NA	ATURE (OF NOTICE,	

REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON*

(other)



(NOTE: Report results of multiple completion or zone change on Form 9-330.)

Set @ _

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.)*

Name of Operator being changed from Hicks Enco, Inc. to Hicks Oil & Gas, Inc.

This notice is being resubmitted by request of James F. Sims, District Oil & Cas Supervisor, Minerals Management Services. Originally filed 9/15/81



Subsurface Safety Valve: Manu. and Type

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

TIME President

DATE _ 5/19/82

DATE ____

(This space for Federal or State office use) AUGERIEU FOR RECORD

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY

JUN 08 1982

FARMINGTON DISTRICT
BY

*See Instructions on Reverse Side