

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

3. TRACT DESIGNATION AND SERIAL NO.  
SF-077968  
6. IF INDIAN, ALLOTTEE OR TRUST LAND

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME Southeast Cha Cha Unit	
2. NAME OF OPERATOR HICKS OIL & GAS, INC.		8. FARM OR LEASE NAME	
3. ADDRESS OF OPERATOR P.O. DRAWER 3307 - FARMINGTON NM 87499		9. WELL NO. #4	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 493' FNL & 660' FWL 1810/S		10. FIELD AND POOL, OR WILDCAT CHA CHA GALLUP	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 9, T28N, R13W	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5952 RDB		12. COUNTY OR PARISH San Juan	
		13. STATE NM	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) Extention

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON\* ☐

CHANGE PLANE ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

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

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT\* ☐

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.)

Per our meeting May 4th, 1989 w/John Keller, Steve Mason, Ken Townsend, J.D. Hicks and myself; we respectfully request another one (1) year extention to submit plans for the subject well.

RECEIVED  
OIL CON. DIV.  
DIST. 8

THIS APPROVAL EXPIRES MAR 01 1990

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

SIGNED JIM HICKS

TITLE PRESIDENT

DATE 5/10/89

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

INMOOD

\*See Instructions on Reverse Side

APPROVED

DATE 5/10/89

MAY 22 1989

DATE

AREA MANAGER  
FARMINGTON RESOURCE AREA