5. LEASE

UNITED STATES

ORTED STATE INTEDIOR	SF 078062
DEPARTMENT OF THE INTERIOR	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
GEOLOGICAL SURVEY	
THE ON WELL	7. UNIT AGREEMENT NAME
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to deepen or plug back to a different eservoir. Use Form 9-331-C for such proposals.)	Carson Unit
	8. FARM OR LEASE NAME
eservoir. Use Form 9-331-C for such proposition,	
1. oil gas other	9. WELL NO.
Well	32-17
2. NAME OF OPERATOR Hixon Development Company	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Bisti Lower Gallup
P.O. Box 2810, Farmington, NM 87499	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA Section 17, T25N, R11W
helow)	
AT SURFACE: 1881' FNL, 1980' FEL 17-25-11	12. COUNTY OR PARISH 13. STATE San Juan
AT TOP PROD. INTERVAL:	Dan Baass
AT TOTAL DEPTH:	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REPORT, OR OTHER DATA	6376 KB
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	0370 13
REQUEST FOR ALTHOUGH	parameter or the control of the cont
FRACTURE TREAT SHOOT OR ACIDIZE	
SHOOT OR ACIDIZE	with a secondaries or tone
DEDAID WELL	(NOT): Report results of multiple completion or zone change on Form 9–330.)
PULL OR ALTER CASING	
MULTIPLE COMPLETE	
CHANGE ZONES ABANDON*	RVEY
(other)	M- (主)
	to all pertinent details, and give pertinent dates
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly stational including estimated date of starting any proposed work. If well is including estimated date of starting for all markers and zones perting	directionally drilled, give subsurface locations and
including estimated date of starting any proposed work. If well is measured and true vertical depths for all markers and zones pertine	ent to this work.)*
The subject well was fraced with 50,000	# 20-40 sand and 52,942
The subject well was flaced with so, or	"
gallons 2% KCl slick water on 5/18/83.	Well was returned to
pump on 5/21/83.	
pump on 3/21/03.	
Subsurface Safety Valve: Manu. and Type	Set @ F
18. I bereby certify that the foregoing is true and correct Petroleum Er	ngineer 6/10/83
Petroleum Ei	ISTILL DATE

*See Instructions on Reverse Side

(This space for Federal or State office use)

____ TITLE ____

_____ DATE __

JUN 1 1983

KI

