

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

Budget Bureau No. 1004-0135  
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO

SF 078064

6. IF INDIAN, ALLOTTEE OR TRIBE 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 reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. ☐ OIL WELL ☐ GAS WELL ☐ OTHER Water Injection

2. NAME OF OPERATOR  
Hixon Development Company

3. ADDRESS OF OPERATOR  
P.O. Box 2810, Farmington, N.M. 87499

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface  
660' FNL, 1880' FWL, Section 13, T25N, R12W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GK, etc.)  
6356' GLE 6360 GL

7. UNIT AGREEMENT NAME  
Carson Unit

8. FARM OR LEASE NAME

9. WELL NO.  
WIW 21-13

10. FIELD AND POOL, OR WILDCAT  
Bisti Lower Gallup

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA  
Sec. 13, T25N, R12W

12. COUNTY OR PARISH  
San Juan

13. STATE  
N.M.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT\*

(Other)

Response to BLM letter dated 6-9-89

(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.)\*

This water injection well will be utilized, as necessary, in the ultimate recovery of reserves from the Carson Unit.

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

SIGNED

*Bruce E. Delventhal*  
Bruce E. Delventhal

TITLE Petroleum Engineer

DATE

JUL 18 1989

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

NMOOD

\*See Instructions on Reverse Side