

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

CBU TRACT #20 14-20-603-324

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

2. NAME OF OPERATOR

HIXON DEVELOPMENT COMPANY

3. ADDRESS OF OPERATOR

510 BANK OF THE SOUTHWEST, AMARILLO, TEXAS 79109

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

520' FSL & 1980' FWL SEC 8 T25N R12W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6252DF

7. UNIT AGREEMENT NAME

CENTRAL BISTI UNIT

8. FARM OR LEASE NAME CBU TRACT #20

~~XXXXXXXXXXXX~~

9. WELL NO.

G-17 68

10. FIELD AND POOL, OR WILDCAT

BISTI LOWER GALLUP

11. SEC. T., R., M., OR BLK. AND
SURVEY OR AREA

8 T25N R12W NMPM

12. COUNTY OR PARISH 13. STATE

SAN JUAN

NEW MEXICO

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)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) CONVERT TO OIL PRODUCER

(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.)*

THIS WELL HAS BEEN CONVERTED TO OIL PRODUCTION BY CONNECTING TO FLOW LINE TO
MAIN BATTERY.

THE WELL WAS TESTED INTERMITTENTLY FOR 30 DAYS FLOWING 3 BOPD AND 0 BWPD 1/4" CK.
FTP = 10 PSI.

WE DO NOT PROPOSE A CHANGE IN WELL NAME OR NUMBER.



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

SIGNED

Barry E. Karp

TITLE EARTH SCIENCES CO. - AGENT

DATE 8-1-72

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: