Form 3160-5
(November 1983)
(Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other Instructions on reverse side)

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

5. LEASE DESIGNATION AND SERIAL NO.

NM 036254A

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.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1.
OIL WELL [X]   GAS WELL [ ]   OTHER

7. UNIT AGREEMENT NAME

Central Bisti Unit

2. NAME OF OPERATOR

Hixon Development Company

8. FARM OR LEASE NAME

3. ADDRESS OF OPERATOR

P.O. Box 2810, Farmington, NM 87499

9. WELL NO.

23

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

1781' FNL, 660' FEL, Section 9, T 25N, R 12W

10. FIELD AND POOL, OR WILDCAT

Bisti Lower Gallup

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

Section 9, T 25N, R 12W

14. PERMIT NO.

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

6221.5' KB

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

16.

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:		
TEST WATER SHUT-OFF		PULL OR ALTER CASING		WATER SHUT-OFF		REPAIRING WELL
FRACTURE TREAT		MULTIPLE COMPLETE		FRACTURE TREATMENT		ALTERING CASING
SHOOT OR ACIDIZE		ABANDON*		SHOOTING OR ACIDIZING	XX	ABANDONMENT*
REPAIR WELL		CHANGE PLANS		(Other) _____		
(Other)				(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 well's perforations at 4779'-4805', 4812'-4818', 4852'-4862',
and 4869'-4879' were stimulated with 1000 gallons of 15% HCL acid
on 9/30/85 and returned to production.

RECEIVED
OCT 31 1985
OIL CON. DIV.
DIST. 3

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

SIGNED _Bruce C. Delventhal_   TITLE Petroleum Engineer   DATE 10-25-85

ACCEPTED FOR RECORD

(This space for Federal or State office use)

APPROVED BY _____   TITLE _____   DATE OCT 30 1985
CONDITIONS OF APPROVAL, IF ANY:

FARMINGTON RESOURCE AREA
BY _____

*See Instructions on Reverse Side

NMOCC