Form 9-331 (May 1963)

UNITED STATES SUBMIT IN TRIPLICATE* DEPARTMENT OF THE INTERIOR (Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to dell) or to deepen or plug back to a different reservo WELL WELL OTHER NAME OF OPERATOR HIXON Development Company ADDRESS OF OPERATOR P. O. Box 2810, Farmington, New Mexico 87401 Location of well (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1880' FNL, 1980' FWL 4. PERMIT NO. 15. ELEVATIONS (Show whether OF, RT, OR, etc.) 6232'DF 6. Check Appropriate Box To Indicate Nature of Notice, Rep NOTICE OF INTENTION TO: TEST WATER SHUT-OFF PRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL CHANGE PLANS (Other) (Other) (Other) (Note: Rep Completed Proposed work. If well is directionally drilled, give subsurface locations and measured and t nent to this work.)* The subject well was pump tested 10/15/76 under a packet 0 BWPD and 366 GOR. The well has a 5 1/2" 15.5# casing Menefee Formation. It is proposed to repair this well's c with a casing inspection log, isolating the hole with a BP a with an estimated 150 sacks cement. Upon approval, this work is anticipated to commence on com-	7. UNIT AGREEMENT NAME Central Bisti Unit 8. FARM OR LEASE NAME CBU Tract No. 16 9. WELL NO. 24 10. FIELD AND POOL, OR WILDCAT Bisti Lower Gallup 11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA 10-25N-12W 12. COUNTY OR PARISH 13. STATE San Juan New Mexic ort, or Other Data SUBSEQUENT REPORT OF: REPAIRING WELL ALTERING CASING ABANDONMENT* ort results of multiple completion on Well r Recompletion Report and Log form.) ont dates, including estimated date of starting any une vertical depths for all markers and zones perti-
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