Form 9-331 (May 1963)

16.

UNITED STATES SUBMIT IN TRIPLICATE* DEPARTMENT OF THE INTERIOR (Other instructions on re-UNITED STATES

Form approved. Budget Bureau No. 42-R1424 5. LEASE DESIGNATION AND BERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

New Mexico

SF 078056

San Juan

SUNDRY	NOTICES	AND	REPORTS	ON	WFIIC	
JUNDAL	140 HCE3	MINU.	WELOW 13	OI4	WELLS	

GEOLOGICAL SURVEY

6200' GLE

(Do not use this form for propose Use "APPLICA	als to drill or to deepen or plug back to a different reservoir. TION FOR PERMIT—" for such proposals.)	
OIL GAS WELL OTHER		7. UNIT AGREEMENT NAME
name of operator Hixon Development Compa	ny	Central Bisti Lower Gallup 8. FARM OR LEASE NAME Unit
ADDRESS OF OPERATOR		9. WELL NO.
P.O. Box 2810, Farmingt		6
LOCATION OF WELL (Report location closes also space 17 below.)	10. FIELD AND POOL, OR WILDCAT	
At surface		Bisti Lower Gallup
	ection 6, T25N, R12W	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 6, T25N, R12W
4. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE

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

NOTICE OF INTENTION TO:			SUBSEQUENT REPORT OF:		
TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)		PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON* CHANGE PLANS		WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) Name Change (Note: Report results of m Completion or Recompletion	
DURGRIDE DROUGERS OF CO.				· · · · · · · · · · · · · · · · · · ·	

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 from a water injection well to production on 3/25/82. The name was changed from CBU WI-11 to CBU No. 6.



8. I hereby certify that the foregoing is true and correct	
SIGNED Petroleum Engineer	4/29/82
ADDONVEN	
(This space for Federal or State of Federal	
CONDITIONS OF APPROVALIMATION 1982	DATE
FOF JAMES F. SIMS	
DISTRICT ENGINEER *See Instructions on Reverse Side	