Form 9-331 (May 1963)

UNITED STATES DEPARTMENT OF THE INTERIOR (Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

U. S. CEOLOGICAL SURVEY FATAVALISTON, N. M.

EOLOGICAL SURVEY	NM	036	254
	1		

	GEOLOGICAL SURVEY		NM 036254	
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		
OIL GAS WELL OTHER WAter Wi Well NAME OF OPERATOR HIXON Development Co. ADDRESS OF OPERATOR			7. UNIT AGREEMENT NAME Central Risti Unit 8. FARM OR LEASE NAME	
			9. WELL NO.	
See also space 17 below.)	ion clearly and in accordance with any	-	10. FIELD AND POOL, OR WILDCAT BISHI GALLUP	
7315 FN,	RIZW, SAN JUAN	Co, N.M.	11. SEC., T., B., M., OR BLK. AND SURVEY OR AREA Socistic Task, Elau	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, 6268 DF	RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE SAN WAY N.M.	
16. Check	Appropriate Box To Indicate N	ature of Notice, Report, or C		
	NTENTION TO:		UENT 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* CHANGE PLANS	(Other)	ABANDONMENT*	
(Other)		(Note: Report results	of multiple completion on Well letion Report and Log form.)	
7/5/24 =	Cut off 4/2 Cag (Spot 30 Stplug) Spot 40 St Plu	2754-4877 W/ across Pt. L 21855, Pulled across Stub, 19	some 70-1800 Torface Plug	
18. I hereby certify that the foregoing	ag is true and correct	DIST.	DATTE SEOF 15 74	
(This space for Federal or State	office (yee)			
APPROVED BY	TITLE		DATE	
CONDITIONS OF APPROVAL,		4	SEP 2 5 1974	