

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Bureau No. 42-R1424
LEASE DESIGNATION AND SERIAL NO.

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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Water Supply Well		7. UNIT AGREEMENT NAME Water Supply for the Central Bisti Lower Gallup Unit	
2. NAME OF OPERATOR Hixon Development Company		8. FARM OR LEASE NAME WS CBU	
3. ADDRESS OF OPERATOR P.O. Box 2810, Farmington, New Mexico 87401		9. WELL NO. 3	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 439' FSL, 173' FEL, Section 8, T25N, R12W		10. FIELD AND POOL, OR WILDCAT Menefee	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 8, T25N, R12W	
15. ELEVATIONS (Show whether OF, RT, etc.) 6225' GLE		12. COUNTY OR PARISH San Juan	
		13. STATE NM	

RECEIVED

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

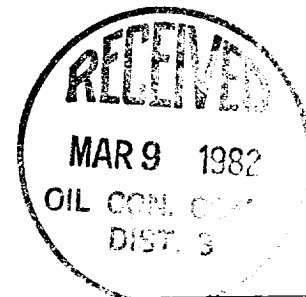
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	U. S. GEOLOGICAL SURVEY <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	WATER SHUT-OFF, N. M. <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	
(Other) <input type="checkbox"/>		(Other) <u>Information</u>	X

(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.)*

The subject well was drilled and completed 4/9/62 by Sunray DX Oil Company as a Menefee water supply well for the Central Bisti Lower Gallup waterflood. Hixon Development Company acquired the Central Bisti Lower Gallup Unit in 1971 and succeeded Sunray DX as Unit operator.

WSW No. 3 is currently shut in and will be reactivated in the near future to supply water for waterflooding and utility purposes.



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

SIGNED Alfred L. Hixson TITLE Petroleum Engineer DATE 3/2/82

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

NMOCC

*See Instructions on Reverse Side

ACCEPTED FOR RECORD
MAR 05 1982
BY Alfred L. Hixson