

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

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

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. SF 078064
2. NAME OF OPERATOR Hixon Development Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 2810, Farmington, New Mexico 87499		7. UNIT AGREEMENT NAME Carson Unit
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1620' FSL, 1630' FEL, Sec. 13, T25N, R12W		8. FARM OR LEASE NAME
14. PERMIT NO.		9. WELL NO. 203
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6405' KB		10. FIELD AND POOL, OR WILDCAT Pictured Cliff
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13, T25N, R12W
		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 <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) <input type="checkbox"/>		(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.)*

Obtained written approval to plug and abandon subject well from Bureau of Land Management on March 8, 1983. Squeezed off perforations and filled 2-7/8" casing with 35 sacks (41.3 cubic feet) Class "B" cement. Cut off 7" surface casing and welded a steel plate over the top of casing. Attached regulation 4" diameter dry hole marker to steel plate with 4' of marker above ground. Welded the following information to dry hole marker:

Hixon Development Company
SF 078064
Carson Unit #203
J-13-25N-12W

RECEIVED
OCT 25 1984
BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

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

SIGNED Bruce E. Delventhal

TITLE Petroleum Engineer

APPROVED
AS AMENDED
DATE October 24, 1984

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

OCT 25 1984

Approved as to plugging of the well bore.

Liability under bond is retained until surface restoration is completed.

Instructions on Reverse Side
NMOCC

person knowingly and willfully to make to any department or agency of the
nts or representations as to any matter within its jurisdiction.

M. MILLENBACH
AREA MANAGER