

**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:		OIL WELL ☒	GAS WELL ☐	DRY ☐	Other _____																																				
b. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐																																				
			DIFF. RESVR. ☐	Other _____																																					
2. NAME OF OPERATOR Hixon Development Company																																									
3. ADDRESS OF OPERATOR P.O. Box 2810, Farmington, New Mexico 87401																																									
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 790' FSL, 1650' FEL, Section 8, T25N, R12W At top prod. interval reported below At total depth																																									
14. PERMIT NO.		DATE ISSUED																																							
5. LEASE DESIGNATION AND SERIAL NO.		14-20-603-325																																							
6. IF INDIAN, ALLOTTEE OR TRIBE NAME																																									
7. UNIT AGREEMENT NAME Central Bisti Unit																																									
8. FARM OR LEASE NAME																																									
9. WELL NO. 73																																									
10. FIELD AND POOL, OR WILDCAT Bisti Lower Gallup																																									
11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA Section 8, T25N, R12W																																									
12. COUNTY OR PARISH		13. STATE																																							
San Juan		New Mexico																																							
15. DATE SPUDDED	16. DATE T.D. REACHED	17. DATE COMPL. (Ready to prod.)	18. ELEVATIONS (DF, REB, RT, GR, ETC.)*	19. ELEV. CASINGHEAD																																					
11-6-80	11-12-80	3-24-81	6231' GLE																																						
20. TOTAL DEPTH, MD & TVD	21. PLUG, BACK T.D., MD & TVD	22. IF MULTIPLE COMPL., HOW MANY*	23. INTERVALS DRILLED BY	ROTARY TOOLS	CABLE TOOLS																																				
5000'	4947'	none	→	X																																					
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Bisti Lower Gallup 4856'-4772'					25. WAS DIRECTIONAL SURVEY MADE yes																																				
26. TYPE ELECTRIC AND OTHER LOGS RUN FDL, CNL, GRS, IES					27. WAS WELL CORED no																																				
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34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) used on lease and sold to EPNG					TEST WITNESSED BY LDR																																				
35. LIST OF ATTACHMENTS																																									
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records. SIGNED <u>Desiré L. Teves</u> TITLE <u>Petroleum Engineer</u> DATE <u>4/1/81</u> <u>FARMINGTON DISTRICT</u>																																									

*(See Instructions and Spaces for Additional Data on Reverse Side) BY

OPERATOR NMOCC

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 33.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION (USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES			38. GEOLOGIC MARKERS	
FORMATION	TOP BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH TRUE VERT. DEPTH
Ojo Alamo Fruitland Coal	Behind Surface casing 1117'			
Pictured Cliffs	1163'			
Lewis	1310'			
Chacra	1488'			
Cliffhouse	1880'			
Maneffee	2549'			
Point Lookout	3567'			
Upper Mancos	3755'			
Upper Gallup	4666'			
Lower Gallup	4752'			