

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.)

RECEIVED

MAY 30 1986

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Hixon Development Company	8. FARM OR LEASE NAME Ray Bridges
3. ADDRESS OF OPERATOR P.O. Box 2810, Farmington, NM 87499	9. WELL NO. 1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 2310' FSL, 660' FWL, Section 25, T 25N, R 12W, NMPM	10. FIELD AND POOL, OR WILDCAT Bisti Lower Gallup
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6410' GR
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 25, T 25N, R 12W	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:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input checked="" type="checkbox"/> Drilling Progress	

(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.)*

Spudded well at 9:15 a.m. on May 23, 1986. Drilled 12-1/4" hole to 344' KB. Ran 329.67' of 8-5/8", 24#, J-55, 8rd surface casing. Installed guide shoe on 1st joint and centralizers on 1st and 3rd joints. Casing set at 342.27' KB. Cemented surface casing using 195 sks (230.10 cu.ft.) of Class "B" cement containing 2% CaCl₂. Circulated cement to surface. Shut well in WOC 12 hours.

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

SIGNED Bruce P. Delventhal TITLE Petroleum Engineer

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

May 29, 1986
ACCEPTED FOR RECORD

DATE JUN 03 1986

FARMINGTON RESOURCE AREA

BY [Signature]

*See Instructions on Reverse Side

NMOCC