

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☐ gas ☒ other ☐
well well

2. NAME OF OPERATOR
Mesa Petroleum Co.

3. ADDRESS OF OPERATOR
1660 Lincoln St., #2800, Denver, CO 80264

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1750' FNL & 805' FWL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐

SUBSEQUENT REPORT OF:

☐
☐
☐
☐
☐
☐
☐
☐

(other) Change of well name from Federal 6 M to Federal 6E

5. LEASE
SF 078813

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Federal

9. WELL NO.
6E

10. FIELD OR WILDCAT NAME
Basin Dakota, Blanco Mesaverde

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 6 - T29N - R11W

12. COUNTY OR PARISH 13. STATE
San Juan New Mexico

14. API NO.
30 - 045 - 24059

15. ELEVATIONS (SHOW DF, KDB, AND WD)
5808' GR

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

State and Federal forms have been filed for the above captioned well in the name of Federal 6M. Mesa Petroleum Co. requests the name be changed to Federal 6E. All further correspondence regarding this well will show the name as Federal 6E.

Please update your records accordingly.

USGS - NMOCC
xc: C. James
T. L. Slife
Southland Royalty Co.
D & M
Gen. Rec.
Div. Files
Kyle Stanley
Rick Paris
Set @ _____ Ft.

Subsurface Safety Valve: Manu. and Type _____

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

SIGNED _____ TITLE Div. Prod. Supervisor 6/10/81

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

ACCEPTED FOR RECORD

JUL 8 1981

*See Instructions on Reverse Side

FARMINGTON DISTRICT
BY RB