

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.	30-045-27615
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease 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" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	7. Lease Name or Unit Agreement Name FC FLAHERTY COM
2. Name of Operator MESA OPERATING LIMITED PARTNERSHIP	8. Well No. # 1
3. Address of Operator P.O. BOX 2009, AMARILLO, TEXAS 79189	9. Pool name or Wildcat Basin Fruitland Coal
4. Well Location Unit Letter L : 2015' Feet From The south Line and 845' Feet From The west Line Section 6 Township Range 10W NMPM San Juan County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 5927' GR	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: TD NOTICE/PROD CSG <input checked="" type="checkbox"/>

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

The above referenced well TD'd @2400' on 7/29/90. RU and ran 7" 23# N-80 LT&C casing, set @ 2400'; cemented with 250 sx Class "B", tailed in with 100 Class "B". Did not circulate to surface. Will run Bond log to determine TOC. Will pressure test casing when RU to complete. WOCU.

RECEIVED
AUG 3 1990
OIL CON. DIV.
DIST. 3

xc: NMOCD-A (0+6), WF, Reg, Land, Expl., Drlg

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Carolyn L. McKee TITLE Sr. Regulatory Analyst DATE 7/31/90
TYPE OR PRINT NAME Carolyn L. McKee (806) 378-1000
TELEPHONE NO.

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY ERNIE BUSCH DEPUTY OIL & GAS INSPECTOR, DIST. #3 DATE AUG 03 1990
CONDITIONS OF APPROVAL, IF ANY: