

October 1982
 S M T W T F S
 3 4 5 6 7 8 9
 10 11 12 13 14 15 16
 17 18 19 20 21 22 23
 24 25 26 27 28 29 30
 31

28

For District file

& ID-2

September 1982
 S M T W T F S
 5 6 7 8 9 10 11
 12 13 14 15 16 17 18
 19 20 21 22 23 24 25
 26 27 28 29 30

November 1982
 S M T W T F S
 7 8 9 10 11 12 13
 14 15 16 17 18 19 20
 21 22 23 24 25 26 27
 28 29 30

301

Thursday, October 28

064

29

Friday
October
1982

8:00

8:30

9:00

9:30

10:00

10:30

11:00

11:30

12:00

1:00

1:30

2:00

2:30

3:00

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4:30

5:00

5:30

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved
Budget Bureau No. 42 B1424

3. LEASE DESIGNATION AND SERIAL NO.

NM 12141

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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.

OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Cibola Energy Corporation

3. ADDRESS OF OPERATOR

P.O. Box 1668, Albuquerque, New Mexico 87103

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)

See also space 17 below.
At surface

990' FNL & 660' FWL

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Mesa Leon Unit

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 22-6N-17E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

5690.73 Gr.

12. COUNTY OR PARISH: 13. STATE

Guadalupe

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"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

PULL OR ALTER CASING

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

WATER SHUT-OFF

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

<input type="checkbox"/>
<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input type="checkbox"/>

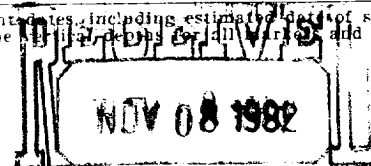
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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 dip for depth for all wells and zones pertinent to this work.)

TD 4920'.

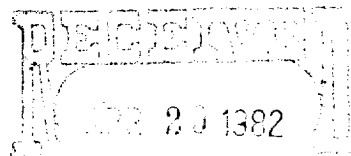
Well was plugged for lack of gas in paying quantities:

12-30-81 1st plug 1900-1750', 45 sacks Class C Cement with 3% CaCl to cover perfs.
2nd plug 1187-1137', 45 sacks Class C Cement with 3% CaCl
3rd plug 1137' tagged at 1062', 25 sacks Class C Cement with 3% CaCl covers 5 1/2" stub.
4th plug 970' tagged at 880', 45 sacks Class C Cement with 3% CaCl covers 8 5/8" stub.
5th plug set dry hole marker at surface with 20 sacks Class C Cement
Spacers between plugs were filled with fresh water gel.



OIL CONSERVATION DIVISION
SANTA FE

NOV 08 1982



OIL CONSERVATION DIVISION
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

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

SIGNED

[Signature]

TITLE Operations Manager

DATE 4-27-82

(This space for Federal or State office use)

APPROVED BY

APPROVED
NOV 5 1982
FOR
JAMES A. GILHAM
DISTRICT SUPERVISOR

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

FOR

JAMES A. GILHAM *See Instructions on Reverse Side

DISTRICT SUPERVISOR