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U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State Fee

5. 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.
(SEE APPLICATION FOR PERMIT - "C" FROM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL GAS WELL OTHER

2. Name of Operator: Mesa Petroleum Co. 7. Unit Agreement Name

3. Address of Operator: P. O. Box 2009 / Amarillo, Texas 79189 8. Farm or Lease Name: Lister

4. Location of Well: UNIT LETTER B 660 FEET FROM THE North LINE AND 1830 FEET FROM 9. Well No.: 2

THE East LINE, SECTION 13 TOWNSHIP 16S RANGE 35E 10. Field and Pool, or Wildcat: North Shoe Bar-Strawn

15. Elevation (Show whether DF, RT, GR, etc.): 3966' GR 12. County: Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK PLUG AND ABANDON
TEMPORARILY ABANDON CHANGE PLANS
PULL OR ALTER CASING OTHER

SUBSEQUENT REPORT OF:

REMEDIAL WORK ALTERING CASING
COMMENCE DRILLING OPS. PLUG AND ABANDONMENT
CASING TEST AND CEMENT JOB
OTHER

17. 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.

Spudded well with 17 1/2" hole on 5-10-84. Drilled to 418' and ran 11 jts 13 3/8", 54.4#, K-55, ST&C casing set at 418'. Cemented with 400 sx "C" + 2% CaCl and circulated to surface. Tested BOPs and casing to 600 psi for 30 min -- OK. Reduced hole to 11" and drilled ahead on 5-11-84*. WOC total of 14 hours.

* Option 2 utilized: 528 cu ft of Class "C" + 2% CaCl mixed at 14.8 ppg @ 100° surface temperature and 60° formation temperature. Estimated cement strength at time of test after 12 hours was 680 psi.

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

SIGNED R. E. Mathis TITLE Regulatory Coordinator DATE 5-15-84

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

MAY 17 1984

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
MAY 16 1984
O.C.D.
HOBBS OFFICE