NO. OF COPIES RECEIVED	13		ARIA, OFFICE	
DISTRIBUTION	-	ı	C D	Form C-103
SANTA FE	1			Supersedes Old C-102 and C-103
	<del>                                     </del>	<del>                                     </del>	NEW MEXICO OIL CONSERVATION COMMISSION AM	Effective 1-1-65
FILE	1		0000 2 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	<u></u>
''.\$.G.\$.				5a. Indicate Type of Lease
AND OFFICE			<b>GECEI</b> NED	State Fee X
OPERATOR				5. State Oil & Gas Lease No.
	<del></del> -			
DO NOT USE THIS FOI	SU	NDR LICAT	Y NOTICES AND REPORTS ON WELLS POSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. ION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)	
OIL GAS WELL  2. Name of Operator			OTHER-	7. Unit Agreement Name
Mesa Petroleum	Cor	npaı	ny V	8. Form or Lease Name ACME
	ild	ing,	Midland, Texas 79701	9. Well No.
4. Location of Well UNIT LETTER	— •		2080 FEET FROM THE SOUTH LINE AND 660 FEET FROM	10. Field and Pool, or Wildcat WILDCAT WOLFCAMP
			N 29 TOWNSHIP 8S RANGE 26E NMPM.	
	~~~			
			15. Elevation (Show whether DF, RT, GR, etc.) 3672' GR	12. County CHAVES
Check Appropriate Box To Indicate Nature of Notice, Report or Other Data				
NOTIC	ΕO	FIN	TENTION TO: SUBSEQUENT	
PERFORM REMEDIAL WORK	}			
TEMPORARILY ABANDON			PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
PULL OR ALTER CASING			CHANGE PLANS CASING TEST AND CEMENT TO V	PLUG AND ABANDONMENT
OTHER			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 1703.				
Drilled 7 7/8" hole to TD of 4900' on 5-6-80. Ran 110 jts 4 1/2", $10.5\#$ , K-55, ST&C casing, FS at 4899', FC at $4861$ ', centralizers on jts 1, 3, 5, 7, 9, 11, 13, 15, 17 and 19. Cemented with 800 sx HOWCO LT + $1/4\#$ Flocele + $10\#$ salt, and tailed in with 745 sx $50/50$ Poz-Mix + $2\%$ gel + $3/10\%$ CFR-2 + $10\#$ salt. PD at 7:45 PM 5-7-80. Cement did not circulate. Ran temperature survey. TOC at 2200'. Released rig at 1:45 AM 5-8-80. WOCU, estimated to arrive 5-19-80.				
18. I hereby certify that the in	forma	tion	boye is true and complete to the best of my knowledge and belief.	
7 -		4	// minimage and better	
TD K. S.	1/0	ich	Regulatory Coordinator	DATE 5-12-80
APPROVED BY W. a.	L	1 re	SUPERVISOR, DISTRICT IS	DATE MAY 1 6 1980
CONDITIONS OF ACCOUNT				

SX: NMOCD (3) TLS, JWH, MEC, ACCTG, CENTRAL RECORDS, PARTNERS, FILE