Form 9-331 (May 1963)	UNITED STATE DEPARTME OF THE I GEOLOGICAL SUF	INTERIOR (Other Instructions in re-	Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO. NM-14982
(Do not us	SUNDRY NOTICES AND REPO e this form for proposals to drill or to deeper Use "APPLICATION FOR PERMIT_"	ORTS ON WELLS a or plug back to a different for our D	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
WELL W 2. NAME OF OPERA		MAY 2 8 1980 U.S. GEULUGICAL SURVEY	7. UNIT AGREEMENT NAME 8. FABM OR LEASE NAME STANCEL FEDERAL
MESA PETROLEUM CO. 3. ADDRESS OF OPERATOR 1000 VAUGHN BUILDING/MIDLAND, IEXAS 79701 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FSL & 1980' FWL			9. WELL NO. 1 10. FIELD AND POOL, OR WILDCAT WILDCAT 11. SEC., T., B., M., OR BLE. AND SURVEY OR ABEA SEC 23, T55, R24E
14. PERMIT NO.	15. ELEVATIONS (Show 3996.5	whether DF, RT, GR, etc.) GR	12. COUNTY OR PARISH 13. STATE CHAVES NEW MEXICO
16.	Check Appropriate Box To In NOTICE OF INTENTION TO:	Other Data Eng Repobt of:	
TEST WATER S FRACTURE TRE SHOOT OR ACH REPAIR WELL (Other)	AT MULTIPLE COMPLETE ABANDON* CHANGE PLANS	i Completion or Recompl	REPAIRING WELL ALTERING CASING ABANDONMENT* of multiple completion on Well etion Report and Log form.)
proposed wo nent to this Dri	<pre>ssep or complete operations (Clearly state a rk. If well is directionally drilled, give subst work.)* lled to 1600' on 5-21-80, r and FC at 1551'. Cemented</pre>	an 4 jts 8-5/8", 24#, K-55,	ST&C Casing, Set

2% CaCl. Tailed in with 200 sx "C" + 2% CaCl. Circulated 85 sxs to pit. PD at 5:00 PM 5-21-80. WOC total of 18 hours. Tested BOPs and casing to 900 psi for 30 minutes - OK. Reduced hole to 7-7/8" and drilled ahead on 5-22-80.

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JUN 3 1980

O. C. D. ARJESIA, OFFICE

18. I hereby certify that the foregoing is true and correct			
SIGNED R. P. Maitre	TITLE _	Regulatory Coordinator	DATE <u>5-27-80</u>
(This space for Federal or State office use)			OBP y 2 YAIR
APPROVED BY CLUCCE H. STEWART CONDITIONS OF APPROVAL, IF ANY:	TITLE _	an en fan Nak al a de gleebeere	DATE

*See Instructions on Reverse Side

XC: USGS (6) JWH, TLS, MEC, PLE, FILE 5-27-80

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