

UN STATES
ARTESIA
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPI
(Other instructions
verse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.
NM-27970

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Coyote Federal

9. WELL NO.
3

10. FIELD AND POOL, OR WILDCAT
Pecos Slope ABO

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA
Sec. 17, T7S, R25E

1. GIL ☐ WELL GAS ☒ WELL OTHER

2. NAME OF OPERATOR
Mesa Petroleum Co.

3. ADDRESS OF OPERATOR
P.O. Box 2009, Amarillo, Texas 79189

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
660' FNL & 1980' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, CR, etc.)
3862' GR

12. COUNTY OR PARISH
Chaves

13. STATE
NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETION

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

(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 vertical depths for all markers and zones pertinent to this work.)*

Propose to P&A as follows:

Set CIBP @ 3570' (ABO perfs 3619-3804') plus 35' cement

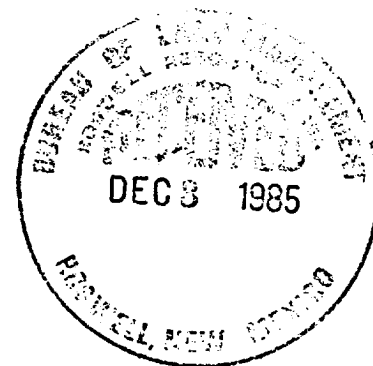
Set 100' plug (8 5/8" csg set @ 1810') from 1860'-1760'

* { Set 200' plug (13 3/8" csg set @ 793') from 850'-750'

Set 50' plug to surface

Install dry hole marker

* These plugs also need to be in the 4 1/2" annulus if cement is not already there. Peter Chester



XC: BLM-R (0+2), NMOCD-A, WF, CR, Acctg, Expl. Land, Reg., Partners

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

SIGNED

P.E. Mackie

TITLE

Regulatory Agent

DATE

12-3-85

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED
PETER W. CHESTER

DEC 19 1985

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

*See Instructions on Reverse Side