

N. C. D. COPY
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE
(Other instructions
reverse side)Form approved.
Budget Bureau No. 42-R1424.

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. NM 22615
2. NAME OF OPERATOR MESA PETROLEUM CO.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME RECEIVED
3. ADDRESS OF OPERATOR 1000 VAUGHN BUILDING/MIDLAND, TX 79701	7. UNIT AGREEMENT NAME O. C. D.
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FNL & 660' FWL	8. FARM OR LEASE NAME ARTESIA, OFFICE
14. PERMIT NO.	9. WELL NO. 5
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3965.7' GR	10. FIELD AND POOL, OR WILDCAT UNDESIGNATED ABO
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SEC 10, T5S, R24E
	12. COUNTY OR PARISH CHAVES
	13. STATE 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"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) 4 1/2" CSG & CMT	
(Other) <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 vertical depths for all markers and zones pertinent to this work.) *

Drilled to TD of 3950' on 4-4-81. Ran 95 jts 4 1/2", 10.5# J-55 casing set at 3879'. Cemented with 400 sx 50-50 Pozmix + 4# gel + 3# KCL + 1/4# cello-flake + 5# gilsonite, tailed in with 200 sx "C". Cement did not circulate. @ 1700'. Rig released at 8:00 PM 4-8-81. WOCU estimated to arrive 4-15-81.

XC: USGS (3), TLS, CEN RCDS, ACCTG, ROSWELL, MEC, LAND, PARTNERS, FILE

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

SIGNED P. F. Mack TITLE REGULATORY COORDINATOR DATE APRIL 9, 1981

(This space for Federal or State Use)

APPROVED BY PETER W. CHESTER
CONDITIONS OF APPROVAL IF ANY

TITLE _____ DATE _____

U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

*See Instructions on Reverse Side