UNITED STATES N.M.O.C.D. GOPY DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

<u>MM</u>	14986				
6.	IF INDIAN,	ALLOTTEE	OR	TRIBE	NAME

5. LEASE

HIDIAN, ALLOTTEL ON TRIBL HAME	
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		4 3 1 5	DEDODEC	ANI	WELLC	
SUNDRY	NOTICES	AND	REPORTS	UN	METT2	

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9–331–C for such proposals.) $\,$

1.	oil	gas well	X	other				
2.	. NAME OF OPERATOR							
	MESA	PETRO I	EUM	co. /				_
3.	ADDRESS							
	7.000	MARIOUR		TI DINC /MIT	OLA MID	TEYNS	70701	

1000 VAUGHN BUILDING/MIDLAND, TEXAS /9/UT

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17

AT SURFACE: 660' FSL & 1980' FEL

AT TOP PROD. INTERVAL: AT TOTAL DEPTH: SAME

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

7. UNIT AGREEMENT N	AME
	AHP 1 1 1001
8. FARM OR LEASE NAM JESS FEDERAL	
9. WELL NO.	
3	ARYESIAL OAR CE
10. FIELD OR WILDCAT N UNDESIGNATED ABO	NAME
11. SEC., T., R., M., OR E AREA	
SEC 1, T6S, R24E	
12. COUNTY OR PARISH CHAVES	13. STATE NEW MEXICO
14. API NO.	

15. ELEVATIONS (SHOW DF, KDB, AND WD) 4172.2' GR

REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON*

SUBSEQUENT REPORT OF: port results of multiple completion or zone Dehlange on Form 9-330.) OIL & OAS GEOLOGICAL SURVEY COSWELL NEW MEXICO

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 7 7/8" hole to TD of 4300' on 7-28-81. Ran 105 jts 4 1/2", 10.5#, K-55 casing set at 4300'. Cemented with 650 sx HLW + 1/4# flocele + 10# salt and tailed in with 450 sx 50-50 Pozmix + 2% gel + 8# salt + 3/10% CFR-2. PD at 7:00 PM 7-29-81. Cement did not circulate. Released rig 11:30 PM 7-29-81. WOCU estimated to arrive 8-10-81.

XC: USGS (3), TLS, CEN RCDS, ACCTG, ROSWELL, MEC, LAND, PARTNERS, FILE Subsurface Safety Valve: Manu. and Type ___ __ Set @ ___ 18. I hereby certify that the foregoing is true and correct TIREGULATORY COORDINAT ORTE ACCEPTED FOR RECORD (This space for Federal or State office use) ROGER A. CHAPMAN APPROVED BY CONDITIONS OF APPROVAL, IF ANY: 6 1981 **AUG** U.S. GEOLOGICAL SURVEY e Instructions on Reverse Side ROSWELL, NEW MEXICO