NM OIL CONS. COMMISSION Drawer DD Artesia, N

UNITED STATES

DEPARTMENT OF THE INTERIOR

5.	LEASE
	NM-36653
6	JE INDIAN ALLOTTEE OR TRIBE NAME

GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTE	E OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to deepen or plug back to a different eservoir. Use Form 9-331-C for such proposals.)	7. UNIT AGREEMENT 8. FARM OR LEASE NA	ME RECEIVED BY
1. oil gas well well well other	Carol Federal 9. WELL NO.	A107 (a) 1703
2. NAME OF OPERATOR	5	ARTESIA, OFFICE
Mesa Petroleum Co.	10. FIELD OR WILDCAT	NAME
3. ADDRESS OF OPERATOR	West Pecos S	
P. O. Box 2009 / Amarillo, TX 79189 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	11. SEC. T., R., M., OR AREA SEC. 1, T7S,	
below.) AT SURFACE: 1844' FNL & 1907' FWL		
AT SURFACE: 1024 FINE & 1907 FWE AT TOP PROD. INTERVAL:	12. COUNTY OR PARISH 13. STATE Chaves New Mexico	
AT TOTAL DEPTH:	14. API NO	
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE.	24. Net 110.	
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOWARD)	
REQUEST FOR APPROVAL TO. SUBSEQUENT REPORT OF:		<u> </u>
TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON*		
FRACTURE TREAT	•	R m
REPAIR WELL		nultiple completion or zone
PULL OR ALTER CASING	change on Form 9	អូ⊑ ហ កា
MULTIPLE COMPLETE		
(other) Spud, 8 5/8" csg & cement		٠ ، ت
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly stationary including estimated date of starting any proposed work. If well is a measured and true vertical depths for all markers and zones pertine.	directionally drilled, give so	d give pertinent dates, ubsurface locations and
Spudded well with 12" hole on 8-12-83. Dril 8 5/8", 24#, K55, ST&C casing set at 1200'. 10% Gypseal + 4% CaCl and tailed in with 200 0235 8-14-83. Cement did not circulate. Raset six plugs with a total of 400 sx "C" + 4 circulate cement. Tested BOPs and casing to Reduced hole to 7 7/8" and drilled ahead on hours.	Cemented with 45) sx "C" + 2% CaCl in temp survey - T % CaCl plus 6 yds > 600 psi for 30 m	0 sx "C" + . PD at OC at 410'. redi-mix to in - ok.
XC: BLM-R (0+6), CEN RCDS, ACCTG, MAT CONT, Subsurface Safety Valve: Manu. and Type 18. I hereby certify that the foregoing is true and correct Regulatory.	. S	et @ Ft.
18. I hereby certify that the foregoing is true and correct Regulatory SIGNED R. F. Mattus TITLE Coordinator	DATE 8=15-8	3
(This space for Federal or State of		
APPROVED BY TITLE		

*See Instructions on Reverse Side

AUG 2 2 1983

ACCEPTED FOR RECORD