

NM C CONS. COMMISSION
Drawer DD
Artesia, NM 88210

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FEB 20 1984

Form Approved.
Budget Bureau No. 42-R1424

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

5. LEASE
NM-20207
O. C. D.
ARTESIA, OFFICE

6. IF INDIAN, ALLOTTEE 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 reservoir. Use Form 9-331-C for such proposals.)

1. oil 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. See space 17 below.)
AT SURFACE: 1980' FNL & 1980' FWL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH: Same

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

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) TD, 4 1/2" csg & cement

SUBSEQUENT REPORT OF:

☐
☐
☐
☐
☐
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☐
☐

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Francis Fed Com

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

Under. Pecos Slope Abo

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 13, T8S, R25E

12. COUNTY OR PARISH

Chaves

13. STATE

NM

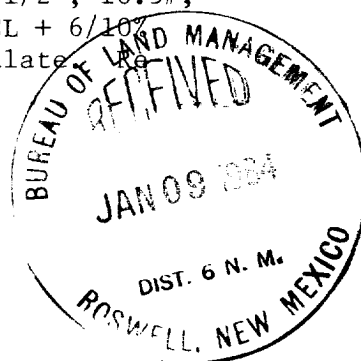
14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3546' GR

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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 4250' on 1-2-84. Ran 128; ts 4 1/2", 10.5#, K55, ST&C csg set at 4250'. Cemented with 450 sx "C" + 5# KCL + 6/10% Cf-1 + 2/10% AF-S. PD at 1230 1-3-84. Cement did not circulate. leased rig at 1800 1-3-84. WOCU.



Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED R. E. Mathis TITLE Regulatory Coordinator DATE 1-4-83

ACCEPTED FOR RECORD This space for Federal or State office use

APPROVED BY PETER W. CHESTER TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

XC: BLM-R(0+6), FEB 17 1984 ACTG, MAT CONT, OPS(FILE), ROSWELL, MIDLAND, PARTNERS