

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE\*  
(Other instructions on re-  
verse side)

Budget Bureau No. 1004-0135  
Expires August 31, 1985 **487**

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-28299
2. NAME OF OPERATOR Mesa Petroleum Co.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 2009/Amarillo, Texas 79189	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FNL & 660' FEL	8. FARM OR LEASE NAME Trout Fed Com
	9. WELL NO. 1
	10. FIELD AND POOL, OR WILDCAT Pecos Slope Abo
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 25, T6S, R24E
14. PERMIT NO.	12. COUNTY OR PARISH 13. STATE Chaves NM
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3781' GR	

RECEIVED BY  
MAY 17 1984  
O. C. D.  
ARTESIA, OFFICE

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 type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANE <input type="checkbox"/>	(Other) TD, 4 1/2" csg & cement <input checked="" 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 7 7/8" hole to TD of 3900' on 4-6-84. Ran 38 jts 4 1/2", 11.6#, N-80, LT&C on bottom and 57 jts 4 1/2", 10.5#, J-55, ST&C csg set at 3900'. Cemented with 450 sx "C" + 5#/sx KCL + 2/10% D-31 + 3/10% D-19. PD at 0130 4-7-84. Cement did not circulate. Released rig at 0600 4-7-84. WOCU.



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

SIGNED R.E. Madala TITLE Regulatory Coordinator DATE 4-9-84

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

XC: BLM-R(0+6)', CEN RCDS, ACCTG, WELL FILE, MIDLAND, ROSWELL, PARTNERS  
\*See Instructions on Reverse Side

DATE ACCEPTED FOR RECORD  
PETER W. CHESTER  
MAY 16 1984