NM OIL CONS. COMMISSION Form Approved. Form 9-331 Drager Do □ Budget Bureau No. 42–R1424 Dec. 1973 . 5 UNITED STATES Artesia, NM odin odin t E \$8261 OLEASE Ċ G \$ 5 = DEPARTMENT OF THE INTERIOR NM-7066 6. IF INDIAN, ALLOTTEE OR TRIBE NAME RECEIVED GEOLOGICAL SURVEY 医直膜炎 7 5 7. UNIT AGREEMENT NAME SUNDRY NOTICES AND REPORTS ON WELLS # 5 T E DET 1 6 198**1** (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.) 8. FARM OR LEASE NAME Wells Federal gas 1. oil Xother 9. WELL NO. well well 10 A Bresia, Office 2. NAME OF OPERATOR 10. FIELD OR WILDCAT NAME Mesa Petroleum Co Diamond Mound Atoka 3. ADDRESS OF OPERATOR 11. SEC., T., R., M., OR BLK. AND SURVEY OR 1000 Vaughn Bldg. / Midland, TX 79701-4493 AREA 2 to 55 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 Sec. 11 T168 3727F below.) 12. COUNTY OR PARISH 13. STATE 1980' FNL & 1980' FWL AT SURFACE: New Mexico AT TOP PROD. INTERVAL: Same Eddv 2505 idi) on AT TOTAL DEPTH: 14. API NO. Ξ Same Ξ. 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, ō 15. ELEVATIONS (SHOW DF, KDB, AND WD) REPORT, OR OTHER DATA 医名品質 3592.21 REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: ō 0 A former ency ebo nd report copies t copies t trement of the TEST WATER SHUT-OFF bluor FRACTURE TREAT SHOOT OR ACIDIZE (NOTE: Report results of multiple completion or zone REPAIR WELL change on Form 9-330.) trons. PULL OR ALTER CASING Nett actions stab (tue bortten bortten bortten MULTIPLE COMPLETE CHANGE ZONES ABANDON* 8-5/8" csq. (other) 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.)* 3 5 ಕ On 8/20/81, risers were brought up on the 13-3/8" casangs and the same 8-5/8" casing, and the cellars were filled with peaggravel. was inspected by Michael Williams of the Artesia N_{ij}^{MOC} đ טלוהפו 1981 9 Off. 3, CA3 Subsurface Safety Valve: Manu. and Type _ qu ROSMELL, NEW MEX 5 7 18. I hereby certify that the foregoing is true and correct -1076/81 FITLE Prod. Recds. Analy Sotate SIGNED ACCEPTED FOR RECORD (This space for Federal or State office use) DATE _ TITLE APPROVED BY CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

USGS,TLS,MEC,LAND,CNT RCDS,ACCTG,D&M,PARTNERS,FILE

E.S. GEGLOGICAL SURVEY