

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:		OIL WELL ☐	GAS WELL ☒	DRY ☐	Other ☐	RECEIVED	
b. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other ☐
2. NAME OF OPERATOR		MESA PETROLEUM CO					
3. ADDRESS OF OPERATOR		1000 VAUGHN BUILDING/MIDLAND, TEXAS 79701					
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*		At surface 2160' FNL & 1980' FWL					
At top prod. interval reported below		Same					
At total depth		Same					
14. PERMIT NO.		DATE ISSUED		12. COUNTY OR PARISH			
		3-18-80		EDDY			
15. DATE SPUDDED		16. DATE T.D. REACHED		17. DATE COMPL. (Ready to prod.)		18. ELEVATIONS (DF, REB, RT, GR, ETC.)*	
4-16-80		5-8-80		5-25-80		3622' GR	
20. TOTAL DEPTH, MD & TVD		21. PLUG, BACK T.D., MD & TVD		22. IF MULTIPLE COMPL., HOW MANY*		23. INTERVALS DRILLED BY	
9365'		9249' WL				ALL	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*		25. WAS DIRECTIONAL SURVEY MADE		19. ELEV. CASINGHEAD			
9100'-9197'		NO		3622'			
26. TYPE ELECTRIC AND OTHER LOGS RUN		27. WAS WELL CORED					
CBL-CCL-GR		NO					
28. CASING RECORD (Report all strings set in well)							
CASINO SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
13-3/8"		48#		350'		17-1/2"	
8-5/8"		24#		1899'		11"	
4-1/2"		10.5/11.6		9365'		7-7/8"	
29. LINER RECORD		30. TUBING RECORD					
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
						SCREEN (MD)	
2-3/8"		9041'		9041'			
31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.					
9100'-9104', 9190'-97', .33 entry, 13 holes		DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED			
		9100'--9197'		Spot A/70 gals 10% Acetic			
33.* PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
SI		Flowing				SI	
DATE OF TEST		HOURS TESTED		CHOKE SIZE		PROD'N. FOR TEST PERIOD	
6-10-80		4		8/64"		OIL—BBL. 3	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE		GAS—MCF. 191	
2690		Pkr		9		WATER—BBL. -	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)		TEST WITNESSED BY		OIL GRAVITY-API (CORR.)			
Vented		R. Pagan		48			
35. LIST OF ATTACHMENTS							
C-122, Record of Inclination							
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records							
SIGNED		TITLE		DATE			
R P. Mache		Regulatory Coordinator		6-20-80			

*(See Instructions and Spaces for Additional Data on Reverse Side)

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formations and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				38. GEOLOGIC MARKERS		
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Lime/Shale	7320	7370		Queen	1051	
Lime/Shale	7410	7695		Grayburg	1436	
Shale/Lime	7865	7970		Glorieta	3163	
Lime/Shale	8690	8830		Tubb	4517	
Lime/Shale/Chert	8910	8980	Fair porosity	ABO	5307	
Lime/Shale/Sand	9100	9197	Good porosity	Wolfcamp	6542	
				Bursum	7385	
				Cisco/Canyon	7575	
				Strawn	8368	
				Atoka	8839	
				Morrow	9048	
				Miss CH SH	9197	
				Miss CH LM	9293	