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NEW MEXICO OIL CONSERVATION COMMISSION

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AUG 7 1980

O. C. D.  
ARTESIA, OFFICE

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. L-3096
7. Unit Agreement Name
8. Farm or Lease Name PENASCO STATE COM
9. Well No. 1
10. Field and Pool, or Wildcat PENASCO DRAW PERMO-PENN
12. County EDDY

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator MESA PETROLEUM CO
3. Address of Operator 1000 VAUGHN BUILDING/MIDLAND, TEXAS 79701
4. Location of Well UNIT LETTER J, 1980 FEET FROM THE SOUTH LINE AND 1980 FEET FROM THE EAST LINE, SECTION 30 TOWNSHIP 18S RANGE 25E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 3626.1' GR

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Propose to kill well and set CIBP at 7050' with 20' of cement on top and set a squeeze packer at 6200' and squeeze perforations from 6498'----6720' with 150 sx Class "C" + .6% Halad 9 + 2% CaCl. Will then re-perforate and acidize at 6499'----6548', 6613'----6662', and 6712'----6720'. Baker Lok-Set packer at 6690' will be recovered from the hole with the tubing when remedial work commences. Anticipate workover to start 8-8-80 and be completed by 8-22-80.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

TO <u>R. F. Mather CCW</u>	TITLE <u>Regulatory Coordinator</u>	DATE <u>8-6-80</u>
APPROVED BY <u>W. A. Gussert</u>	TITLE <u>SUPERVISOR, DISTRICT II</u>	DATE <u>AUG 11 1980</u>
CONDITIONS OF APPROVAL, IF ANY:	XC: NMOC (6) TLS, JWH, JBH, MEC, PARTNERS, FILE	