

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEX

RECEIVED

MAY 11 1983

Form C-103
Revised 10-1-73

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O. C. D.
ARTESIA, OFFICE

3a. Indicate Type of Lease
State ☒ Fed ☐
3. State Oil & Gas Lease No.
L-324

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 ☐ GAS WELL ☐ OTHER	7. Well Agreement Name
2. Name of Operator Mesa Petroleum Co. ☒	8. Name of Lease Name Hondo "A" State
3. Address of Operator P. O. Box 2009 / Amarillo, TX 79189	9. Well No. 4
4. Location of Well UNIT LETTER <u>M</u> <u>660</u> FEET FROM THE <u>South</u> LINE AND <u>330</u> FEET FROM <u>West</u> LINE, SECTION <u>32</u> TOWNSHIP <u>20S</u> RANGE <u>28E</u> N.M.P.M.	10. Field and Pool, or Wildcat <u>Used, Burton Flats Delaware</u>
15. Elevation (Show whether DF, RT, GR, etc.) 3199.8' GR	12. County Eddy

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPER. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOB ☒	OTHER ☐

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.

Drilled 12" hole to 2440' on 5-8-83 and ran 58 jts 8 5/8", 24#, K-55, ST&C casing set at 2440'. Cemented with 1180 sx BJ Lite + 5# Gilsonite + 2/10% defoamer + 1/4# cello-flakes and tailed in with 150 sx "C" + 2% CaCl + 1/4# cello-flakes. PD at 0930 5-8-83. Circulated 200 sx. Held 1000 psi on casing for 3 1/2 hours due to float failure. Tested BOPs and casing to 1000 psi for 30 min. - ok. Reduced hole to 7 7/8" and drilled ahead on 5-9-83, WOC total of 18 hours.

XC: NMOCD-A (0+2), CEN RCDS, ACTG, MAT CONT, OPS (FILE), MIDLAND, HOBBS, PARTNERS

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

SIGNED <u>R. F. Mathis</u>	TITLE <u>REGULATORY COORDINATOR</u>	DATE <u>5-10-83</u>
Original Signed By Leslie A. Clements Supervisor District II		
APPROVED BY _____	TITLE _____	DATE <u>MAY 11 1983</u>
CONDITIONS OF APPROVAL, IF ANY:		