

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYN. M. O. C. COPY  
SUBMIT IN TRIPLICATE\*  
(Other instruct on reverse side)Form approved.  
Budget Bureau No. 42-R1424.

## 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"/>	RECEIVED	5. LEASE DESIGNATION AND SERIAL NO. NM 0556857
2. NAME OF OPERATOR Mesa Petroleum Co. ✓	MAR 18 1976	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 904 Gihls Tower West, Midland, TX 79701	U. S. G. E. ARTESIA, OFFICE	7. UNIT AGREEMENT NAME Nash Unit
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface		8. FARM OR LEASE NAME Nash Unit
		9. WELL NO. 2
		10. FIELD AND POOL, OR WILDCAT Nash Draw, Morrow
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 18, T23S, R30E
14. PERMIT NO. 1350' FNL & 1980' FWL of Section 18.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3039' GR 3057' RKB	12. COUNTY OR PARISH Eddy
		13. STATE NM

## 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 PLANS <input type="checkbox"/>	(Other) 5" liner <input type="checkbox"/>	(Other) <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 6½" hole to 13,946' on 3-3-76. Ran electric logs, then ran 82 jts 5" 23.20# C-75 Hydril SFJP with TIW liner hanger and PBR. Installed float shoe with float collar one joint up. Plug latching collar on top of float collar. Installed centralizer on mid shoe joint and middle of joints #3, 5, 7 and 9. Hung liner with shoe at 13,946', float collar at 13,901' and top of liner at 10,962'. Pumped 20 bbls CW7 chemical wash followed by 10 bbls of spacer followed by 550 sx Class 'H' with 0.3% D-65 friction reducer, 0.25% D-13 retarder and 0.4 gals D-73 fluid loss additive mixed at 16.0 PPG. Bumped plug with 1900 psi, pressured to 2200 psi at 1:00 PM, 3-5-76. Released pressure, floats held. Pulled 5 stands and started reversing out. Started losing fluid. Shut down and POOH. Did not tag cement with bit when returning to liner top. Set retainer at 10,602' and squeezed liner with 300 sx Class 'H' with 0.1% D-13 mixed at 15.0 PPG. Max pressure 1400 psi, min 1000 psi, ISDP 1400 psi. Job complete at 12:45 PM, 3-7-76. Drilled up retainer and hard cement to top of liner. Ran and set RITS tool at 10,665'. Pressured liner to 3000 psi - 30" - okay. Displaced mud in drill pipe and negative differential tested liner top to 2200 psi - okay.

RECEIVED

MAR 17 1976

U. S. GEOLOGICAL SURVEY

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

SIGNED Michael P. HoustonTITLE Division EngineerDATE March 16, 1976

(This space for Federal or State office use)

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

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

1-JLF, 1-MEC, 1-LMC, 1-JWH, 9-WP Partners, 5-DISGS  
See Instructions on Reverse Side 3-16-76