

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE
(Other Instructions on reverse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 19423

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 checked="" type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Mesa Petroleum Co.		8. FARM OR LEASE NAME White City Fed "10" Com	
3. ADDRESS OF OPERATOR 1000 Vaughn Building; Midland, Texas 79701		9. WELL NO. 1	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1650' FNL & 1650' FEL		10. FIELD AND POOL, OR WILDCAT White City (Penn)	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3412' GR	
		12. COUNTY OR PARISH Eddy	
		13. STATE New Mexico	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input checked="" type="checkbox"/> Status Report		<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.)*

MICU on 6-20-78. Drilled cement stringers from 8218' to 8244'. Tested casing to 1500 psi 30 min. OK. Finished trip in hole to plugback TD of 11,963'. Perforated 11,834-11,836; 11,906-11,912, 11,915-11,933, 11,964-11,966 on 6-27-78. Dropped bar, had lazy flare to surface. Acidized perfs with 3000 gals, 10% HCL-MSR 150 with nitrogen and ball sealers. Had weak response (400 mcfpd). Ran BHP survey on 7-5-78. Evaluating results.

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

SIGNED

Michael P. Houston

TITLE

Division Engineer

DATE

7-11-78

(This space for Federal or State office use)

APPROVED BY

[Signature]

TITLE

ACTING DISTRICT ENGINEER

DATE

JUL 17 1978

CONDITIONS OF APPROVAL, IF ANY: