

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☒ well gas ☐ well other ☐

2. NAME OF OPERATOR
Mesa Petroleum Co.

3. ADDRESS OF OPERATOR
1660 Lincoln St. #2800, Denver CO 80264

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 660' FNL, 2295' FWL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

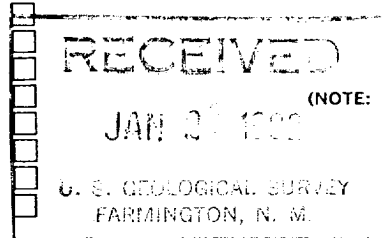
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐

(other) Spud Notice & BOP Test

SUBSEQUENT REPORT OF:



5. LEASE

NM 12233

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

South Blanco Federal 26

9. WELL NO.

4

10. FIELD OR WILDCAT NAME

Lybrook Gallup Extension

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 26-T24N-R8W

12. COUNTY OR PARISH 13. STATE

San Juan

New Mexico

14. API NO.

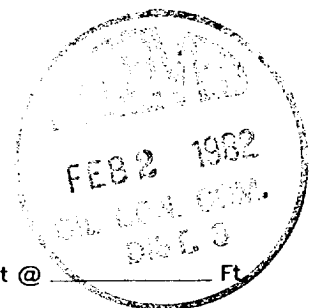
15. ELEVATIONS (SHOW DF, KDB, AND WD)

6897' GL

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

Subject well was spudded at 9:00 PM 1/16/82 using a 12½" bit. Drilled to 266', ran 6 joints new 8-5/8" 24#/foot K-55 STC surface casing and set at 261'. Cemented casing with 225 sacks class "B". Circulated cement to the surface. Tested BOP to 1000 psi for 30 minutes - held OK.



Subsurface Safety Valve: Manu. and Type _____

Set @ _____ Ft

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

SIGNED Randy Nordmark TITLE Reg. Coordinator DATE 1/19/82

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

FEB 1 1982

*See Instructions on Reverse Side

NMOC

FARMINGTON DISTRICT

BY [Signature]