

N.M.O.G.D. GC

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
1000 VAUGHN BUILDING/MIDLAND, TEXAS 79701

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FSL & 660' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH: SAME

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) TD, 4 1/2" csg & cement

SUBSEQUENT REPORT OF:

RECEIVED
SEP 11 1981

OIL & GAS
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

5. LEASE
NM-15863

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SEP 16 1981

7. UNIT AGREEMENT NAME
O. C. D.

8. FARM OR LEASE NAME
ARTESIA, OFFICE
COTTONWOOD FEDERAL

9. WELL NO.
1

10. FIELD OR WILDCAT NAME
UNDESIGNATED ABO

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC 26, T6S, R25E

12. COUNTY OR PARISH
CHAVES

13. STATE
NEW MEXICO

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3761.6' GR

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 7-7/8" hole to TD of 4250' on 8-31-81. Ran 103 jts 4 1/2", 10.5#, K55 casing set at 4210'. Cemented with 650 sx HLW + 10# salt + 1/4# Flocele + 3% HALAD 4, and tailed in with 450 sx 50-50 Pozmix + 2% Gel + 8# salt + 3/10% CFR-2. PD at 8:30 a.m. 9-1-81. Released rig at 1:00 p.m. 9-1-81. WOCU estimated to arrive 10-1-81.

XC: USGS (b), TLS, CEN RCDS, ACCTG, MEC, LAND, PARTNERS, ROSWELL, FILE
Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED ROGER A. CHAPMAN TITLE REGULATORY COORDINATOR DATE 9-4-81

SEP 15 1981 (This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO