

DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

C/SF
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 TX 79701-4493
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
1980' FSL & 660' FEL
AT SURFACE:
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) CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

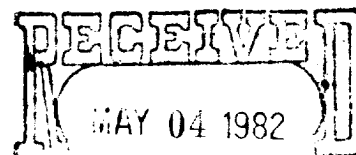
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5. LEASE
NM-36647
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
RECEIVED
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
MACHO FEDERAL
9. WELL NO.
1
10. FIELD OR WILDCAT NAME
UNDESIGNATED ABO
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC 5, T7S, R23E
12. COUNTY OR PARISH
CHAVES
13. STATE
NEW MEXICO
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3985.4' GR

(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.)*

Propose to drill subject well with mud. Will set (plus or minus) 1000' of 8 5/8" casing as per phone conversation between G. Stewart of MMS/R. E. Mathis of MESA on 4-30-82.



XC: MMS (7), TLS, CEN RCDS, ACCTG, MEC, ROSWELL, REM, FILE, (PARTNERS)
Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED *R. E. Mathis* TITLE REGULATORY COORDINATOR DATE 4-30-82

ACCEPTED FOR RECORD
APPROVED BY *GS*
CONDITIONS OF APPROVAL, IF ANY:

(This space for Federal or State office use)

TITLE _____ DATE _____

MAY 4 1982
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

*See Instructions on Reverse Side