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MAY 07 1983

O. C. D.
ARTESIA OFFICEUNITED 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 ☒ P&A

2. NAME OF OPERATOR

Mesa Petroleum Co.

3. ADDRESS OF OPERATOR

P. O. Box 2009 / Amarillo, Texas 79189

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 1980' FSL & 660' FEL

AT TOP PROD. INTERVAL: Same

AT TOTAL DEPTH: Same

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

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

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

(other)

5. LEASE

NM-36647

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Macho Federal

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

Undes. West Pecos Slope 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)
3984.5' GR

(NOTE: Report results of multiple completion or 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.)*

Well was plugged as follows:

Set CIBP @ 2770' with 35' cement on top
 Set 25 sx cement plug from 2350' to 2250'.
 Set 45 sx cement plug from 1050' to 950'.
 Set 50 sx cement plug from 150' to surface.
 Cut off 8 5/8" bradenhead.
 Installed dry hole marker.

Well is P&A'd at 1800 hours, 11-15-83.

PARTNERS

XC: BLM-R(0+6), CEN RCDS, ACCTG, MAT CONT, RES ENG, OPS(FILE), ROSWELL, MIDLAND,
Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED R. F. Mathis TITLE COORDINATOR DATE 11-18-83

(This space for Federal or State office use)

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

*See Instructions on Reverse Side

APPROVED
PETER W. CHESTER
MAY 3 1985
BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

RECEIVED
 NOV 21 11 39 AM '83
 BUREAU OF LAND MANAGEMENT
 ROSWELL DISTRICT

C/SF