

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 TX 79701-4493

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
860' FNL & 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:	SUBSEQUENT REPORT OF:
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 ☐	☐

5. LEASE
NM-36653

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
CAROL FEDERAL

9. WELL NO.
1

10. FIELD OR WILDCAT NAME
UNDESIGNATED ABO

11. SEC., T., R., M. OR BLK. AND SURVEY OR AREA
SEC 13, T7S, R22E

12. COUNTY OR PARISH
CHAVES

13. STATE
NEW MEXICO

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
4198.9' 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.)*

Drilled 7 7/8" hole to TD of 3200' on 6-4-82. Ran 76 jts 4 1/2" 10-5#, K-55 Casing set at 3146'. Cemented with 350 sxs Class "C" + 5#/sx KCL + 3 1/2% Halad 2/10% CFR-2. PD at 1:30 AM, 6-5-82. Cement did not circulate. 6-5-82. WOCU estimated to arrive 6-14-82.

XC: MMS (7), TLS, CEN RCDS, ACCTG, MEC, ROSWELL, REM, FILE PARTNERS

Subsurface Safety Valve: Manu. and Type _____

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

SIGNED R. E. [Signature] REGULATORY COORDINATOR
ACCEPTED FOR RECORD TITLE _____ DATE _____

(ORIG. SGD.) DAVID R. GLASS (This space for Federal or State office use)

APPROVED BY _____ DATE _____
CONDITIONS OF APPROVALU.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

See Instructions on Reverse Side