

UNITED STATES
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, TEXAS 79701

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 660' FNL & 660' FWL
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) 8 5/8" CSG & CEMENT

SUBSEQUENT REPORT OF:

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RECEIVED
OCT 14 1981

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

5. LEASE
NM 40029
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME RECEIVED
8. FARM OR LEASE NAME
ALKALI FEDERAL OCT 19 1981
9. WELL NO.
4
10. FIELD OR WILDCAT NAME
UNDESIGNATED ABO
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC 22, T5S, R25E
12. COUNTY OR PARISH
CHAVES
13. STATE
NEW MEXICO
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3768' 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 11" hole to 1614' and ran 37 jts 8 5/8", 24#, K-55 casing set at 1612'. Cemented with 800 sx HLW + 1# flocele + 4% CaCl₂, 300 sx Thixset + 4% CaCl₂, and tailed in with 200 sxs "C" + 2% CaCl₂. PD at 1:00 AM 10-9-81. Circulated 20 sx. Tested BOP's and casing to 600 psi for 30 min - OK. Reduced hole to 7 7/8" and drilled ahead on 10-9-81. WOC total of 19 hours.

XC: USGS (3), 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 ROBERT A. CHAPMAN TITLE REGULATORY COORDINATOR DATE OCTOBER 13, 1981

OCT 16 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