

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 ☐ gas ☒ 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' FSL & 1980' FWL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:
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) Spud, 13-3/8" C

SUBSEQUENT REPORT OF:

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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.)*

Spudded well with 17-1/2" hole on 12-3-81. Lost circulation from 550' to 845'. Drilled to 900' and ran 23 jts 13-3/8", 48#, H40 casing set at 898'. Cemented with 700 sx HLW + 1# Flocele + 4% CaCl, 300 sx Thixset + 4% CaCl, and tailed in with 300 sx "C" + 2% CaCl. PD at 1:55 a.m. 12-5-81. Cement did not circulate. Ran temp survey--TOC at 365'. Set three plugs with a total of 800 sx Thixset 4% CaCl to circulate cement. Blew hole dry and waited 1 hour--no fluid entry. Reduced hole to 12-1/4" and drilled ahead on 12-6-81. WOC total of 22-1/2 hours.

XC: USGS (6), TLS, CEN RCDS, ACCTG, MEC, REM , PARTNERS, ROSWELL , FILE
Subsurface Safety Valve: Manu. and Type Set @

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

SIGNED

ROGER A. CHAPMAN

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY _____

U.S. GEOLOGICAL SURVEY
POSWELL, NEW MEXICO

REGULATORY COORDINATOR

12-8-81

(This space for Federal or State office use)

TITLE

DATE _____

***See Instructions on Reverse Side**