Form 9-331 Dec. 1973

MV OIL CONS. COMMISSION

Drawe DD

Artesia, NM 88210

Form Approved.				
Budget	Bureau	No.	42-R14	24

UNITED STATES	5. LEASE NM-14982		
DEPARTMENT OF THE INTERIOR	6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
GEOLOGICAL SURVEY	S. II WOME, ACCOUNTS ON THIS SERVICE OF THE SERVICE		
SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a different	7. UNIT AGREEMENT NAME		
reservoir. Use Form 9-331-C for such proposals.)	8. FARM OR LEASE NAME STANCEL FEDERAL		
well well X other	9. WELL NO.		
2. NAME OF OPERATOR MESA PETROLEUM CO	10. FIELD OR WILDCAT NAME		
3. ADDRESS OF OPERATOR	UNDESIGNATED ABO		
1000 VAUGHN BUILDING/MIDLAND, TEXAS 79701	11. SEC., T., R., M., OR BLK. AND SURVEY OR		
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA SEC 23, T5S, R24E		
below.) at surface: 66C' FNL & 1980' FWL	12. COUNTY OR PARISH 13. STATE		
AT TOP PROD. INTERVAL:	CHAVES NEW MEXICO		
AT TOTAL DEPTH: Same	14. API NO.		
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 3981' GR		
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF L			
SHOOT OR ACIDIZE			
PULL OR ALTER CASING	1300 TE: Report results of multiple completion or zone change on Form 9–330.)		
MULTIPLE COMPLETE	And the second s		
CHANGE ZONES	OL BORMON		
(other) TD, 4 1/2" csg & cement			
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly statincluding estimated date of starting any proposed work. If we lis dimeasured and true vertical depths for all markers and zones pertinent	irectionally drilled, give subsurface locations and		
Drilled 7-7/8" hole to TD of 4150' on $12-8-81$. K-55 casing set at 4150'. Cemented with 500 sx and tailed in with 500 sx "C" + 5% KCL + $3/10\%$ 6:30 A.M. $12-9-81$. Cement did not circulate. In 12-9-81. WOCU estimated to arrive $12-15-81$.	HLW + 10# sait $+ 1/4#$ flocele,		
XC: USGS (6), TLS, CEN RCDS, ACCTG, MEC, REM, Subsurface Safety Valve: Manu. and Type	PARTNERS, ROSWELL, FILE		
	2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3		
18. I hereby certify that the foregoing is true and correct SIGNED R. F. Market T. REGULATORY COORD	INATORATE 12-10-81		
(This space for Federal or State off	ice use)		
CONDITIONS OF APPROVAL IF ANY TOTER	DATE		
U.S. COLDENZA STAVEY See Instructions on Reverse S	Side		