Form 9-331 Dec. 1973 TOURCE LD NM 88210

Form Approved. Budget Bureau No. 42-R1424

UNITED STATES DEPARTMENT OF THE INTERIOR	5. LEASE NM-40029
C/SF GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME RECEIVED
(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.)	8. FARM OR LEASE NAME FEB 24 1982 Alkali Fed Com
1. oil gas well other	9. WELL NO. O. C. D.
2. NAME OF OPERATOR MESA PETROLEUM CO. /	10. FIELD OR WILDCAT NAME ARTESIA, OFFICE
3. ADDRESS OF OPERATOR 1000 VAUGHN BUILDING/MIDLAND, TEXAS 79701	Undesignated Abo 11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA Sec 33, T5S, R25E
below.) AT SURFACE: 400' FSL & 1980' FEL	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL:	Chaves New Mexico
AT TOTAL DEPTH:	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 3703' GR
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF U U TO THE STATE OF THE	1000 - 10
SHOOT OR ACIDIZE	
REPAIR WELL PULL OR ALTER CASING AND THE COMPLETE THE COMPLETE IN THE COMP	(NOTE: Report results of multiple completion or zone change on Form 9–330.)
MOETIFEE COMPLETE	1302 201
CHANGE ZONES	
(other) 8 5/8" csg & cement	a 4 Survey
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is d measured and true vertical depths for all markers and zones pertinent	e all pertinent details, and give pertinent dates, irectionally drilled, give subsurface locations and
Drilled 12 1/4" hole to 1850' and ran 48 jts 8 1838'. Cemented with 700 sx HLW + 1# Flocele	+ 4% talli. 300 SX inixSet + 4%
C_2C_1 and tailed in with 300 sx "C" + 2% CaCl.	PD at 11:30 a.m. 1-15-62.
Circulated 25 sx. Tested BOPs and casing to 60	JO psi for 30 liftiok: woo
total of 18 1/2 hours.	·
XC: USGS (6), TLS, CEN RCDS, ACCTG, MEC, REM, Subsurface Safety Valve: Manu. and Type	PARTNERS, ROSWELL, FILE
18. I hereby certify that the foregoing is true and correct	
SIROGER A: CHAPMAN	INATORATE 1-20-82
(This space for Federal or State off	ice use)
APPROVED BY 1 1002 CONDITIONS OF APPROVAL, IF ANY	DATE

U.S. GEOLOGICAL SURVEY ROSWELL, NEW MEXICO