SF/Jile

Form Approved. U Budget Bureau No. 42-R1424

| OMILED STATES | 5. LEASE |
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| DEPARTMENT OF THE INTERIOR | NM-14754 |
| GEOLOGICAL SURVEY | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| SUNDRY NOTICES AND REPORTS ON WELLS | 7. UNIT AGREEMENT NAME |
| (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 24 198 Foreman Federal |
| 1. oil gas X other | 9. WELL NO. O. C. D. |
| 2. NAME OF OPERATOR MESA PETROLEUM CO. | 4 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. 17, T6S, R25E |
| below.) AT SURFACE: 660' FNL & 1980' FWL | 12. COUNTY OR PARISH 13. STATE |
| AT TOP PROD. INTERVAL: AT TOTAL DEPTH: | Chaves New Mexico |
| | 14. API NO. |
| 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | 15. ELEVATIONS (SHOW DF, KDB, AND WD) |
| REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: | 4002' GR |
| TEST WATER SHUT-OFF | গুণ্ডেল |
| REPAIR WELL | (NOTE: Report results of multiple completion or zone change on Form 9–330.) |
| | 9 1982 change on Form 9-330.) |
| CHANGE ZONES | GAS |
| (other) 8 5/8" csg & cement U.S. GEOLOG | ACAL SUBVEY |
| 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is a measured and true vertical depths for all markers and zones pertined. Drilled 12 1/4" hole to 1731'. Hit brackish w | firectionally drilled, give subsurface locations and nt to this work.)* |
| Ran 45 jts 8 5/8", 24#, K-55 casing set at 173 + 1# Flocele + 4% CaCl, 300 sx Thixset + 4% CaCl. 'C" + 2% CaCl. 'PD at 12:00 midnight 1-26-82. and casing to 600 psi for 30 minok. Reduced on 1-26-82. WOC total of 18 hours. | Bl'. Cemented with 700 sx HLW BCl, and tailed in with 300 sx Circulated 150 sx. Tested BOPs |
| | |
| 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 | |
| SIGNED R.P. Months TIREGULATORY COORD | INATOB _{ATE} 1-27-82 |
| (This space for Federal or State of | fice use) |
| APPROVED BY ACCEPTED FOR RECORD CONDITIONS OF TREPROVIL AF CHYAPMAN | DATE |
| | |

ee Instructions on Reverse Side