

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 ☐
well well
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 & 1980' 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) TD, 4 1/2" csg & cement

SUBSEQUENT REPORT OF:

RECEIVED
FEB 3 1982

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

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 7 7/8" hole to TD of 4212' on 1-27-82. Ran 102 jts 4 1/2", 10.5#, K-55 casing set at 4212'. Cemented with 500 sx "C" + 5 KCL + 3/10% HALAD - 4 + 2/10% CFR - 2. PD at 12 noon 1-28-82. Cement did not circulate. Released rig at 6:00 p.m. 1-28-82. WOCU estimated to arrive 2-8-82.

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

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

SIGNED

R. A. Chapman

REGULATORY COORDINATOR

1-29-82

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

FEB 16 1982

U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

(This space for Federal or State office use)

TITLE

DATE

*See Instructions on Reverse Side

SF/ Jell

RECEIVED

FEB 24 1982

O. C. D.

ARTESIA, OFFICE

(NOTE: Report results of multiple completion or zone change on Form 9-330.)