c/SF

Drawer

Form Approved. Budget Bureau No. 42-R1424

## UNITED STATES

Artesia, Na

DEPARTMENT OF THE INTERIOR

**GEOLOGICAL SURVEY** 

525 LEASE	
NM-32167	

7. UNIT AGREEMENT NAME

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

RECEIVED

## 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.)

gas well  $\boxtimes$ other 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.) 660' FSL & 990' FWL AT SURFACE:

AT TOP PROD. INTERVAL: same AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

MAY - 6 1982 8. FARM OR LEASE NAME Spring Fed Com O. C. D. 9. WELL NO.

ARTESIA, OFFICE 3 10. FIELD OR WILDSAT NAME Undesignated, ABU

11. SEC., T., R., M., OR BLK. AND SURVEY OR **AREA** 

Sec 4, T6S, R26E

12. COUNTY OR PARISH 13. STATE New Mexico Chaves

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD) 3641' GR

SUBSEQUENT REPORT OF: REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON\* csg & cement (other)

'AR 151982

(NOTE: Report results of multiple completion or zone

Off & 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" casing to TD of 4450' on 3-10-82. Ran 102 jts 4 1/2", 10.5#, K-55 casing set at 4442'. Cemented with 380 sx "C" + 5# KČL + 3/10% HALAD -4 + 2/10% ČFR - 2. PD at 10:00 p.m. 3-10-82. Cement did not circulate. Released rig at 6:00 a.m. 3-11-82. WOCU estimated to arrive 3-22-82.

XC: MMS (6), TLS, CEN RCDS, ACCTG, MEC, REM , PARTNERS Ft. Subsurface Safety Valve: Manu. and Type 18. I hereby certify that the foregoing is true and correct TIREGULATORY COORDINAT (This space for Federal or State office use)

APPROVED BY CONDITIONS OF APPROVAL, IF ANY:

\*

RECEIVED

APR 80 1982

MCBBS CARGE