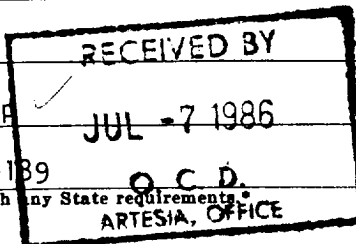


c/5F

# 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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☐ GAS WELL ☒ OTHER ☐  
2. NAME OF OPERATOR  
Mesa Operating Limited Partnership  
3. ADDRESS OF OPERATOR  
P.O. Box 2009, Amarillo, Texas 79139  
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface  
1750' FSL & 1980' FEL



5. LEASE DESIGNATION AND SERIAL NO.  
NM-36648  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
7. UNIT AGREEMENT NAME  
8. FARM OR LEASE NAME  
CHINA FEDERAL  
9. WELL NO.  
6  
10. FIELD AND POOL, OR WILDCAT  
West Pecos Slope Abo  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 17, T7S, R23E  
12. COUNTY OR PARISH  
Chaves  
13. STATE  
NM

14. PERMIT NO.  
15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
3979' GR

## 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

### NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) Long Term Shut-In <input checked="" type="checkbox"/>	

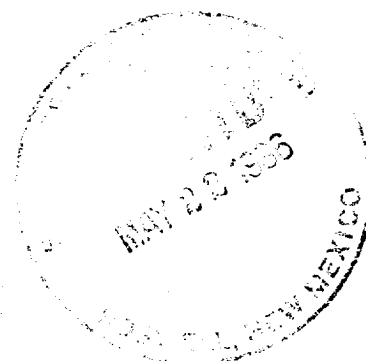
### SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.) \*

Subject well was approved for P&A in December, 1985. Mesa requests that P&A approval be rescinded and that the subject well be placed in a long term SI status pending change in market and/or field conditions.



XC: BLM-R (0+2), CR, Acctg, Prod Rcds, Expl, Reg, Partners

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

SIGNED R. L. Mathis TITLE Safety & Regulatory Agent DATE 5/19/86

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD  
PETER W. CHESTER

JUN 27 1986

BUREAU OF LAND MANAGEMENT  
ROSWELL RESOURCE AREA

\*See Instructions on Reverse Side