

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill, to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

1. oil ☐ gas ☒ other

2. NAME OF OPERATOR
Mesa Petroleum Co. ✓

3. ADDRESS OF OPERATOR
PO Box 2009 / Amarillo, Texas 79189

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FNL & 1980' FWL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF ☐ ☐
FRACTURE TREAT ☐ ☐
SHOOT OR ACIDIZE ☐ ☐
REPAIR WELL ☐ ☐
PULL OR ALTER CASING ☐ ☐
MULTIPLE COMPLETE ☐ ☐
CHANGE ZONES ☐ ☐
ABANDON* ☐ ☐
(other) Spud 10-3/4" Casing & Cement

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.)*

Spudded well with 14-3/4" hole on 10-12-82. Drilled with FW to 950' and ran 22 jts 10-3/4", 40.5#, K-55, ST&C Casing set at 950'. Cemented with 700 SX HLW + 1/4# Flocele + 4% CaCl and tailed in with 200 SX "C" + 2% CaCl. Pd at 6:00 a.m. 10-13-82. Circulated 140 SX. Tested BOPs and casing to 600 psi for 30 min - - ok. Reduced hole to 9-7/8" and drilled ahead on 10-14-82. WOC total of 20 hours.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED David R. Glass TITLE Regulatory Coordinator DATE 10-14-82

ACCEPTED FOR RECORD

(This space for Federal or State office use)

(ORIG. SGD.) DAVID R. GLASS

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL _____

OCT 21 1982

U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

XC: MMS-1 (0+6) CEN BODS ACCTG, ROSWELL, MIDLAND, FILE, PARTNERS ()

*See Instructions on Reverse Side

5. LEASE
NM-31098
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME RECEIVED
8. FARM OR LEASE NAME Leila Federal OCT 22 1982
9. WELL NO. 1 O. C. D. ARTESIA, OFFICE
10. FIELD OR WILDCAT NAME Undesignated ABO
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 24, T6S, R26E
12. COUNTY OR PARISH Chaves 13. STATE New Mexico
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3794' GR

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