

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 ☐ P&A2. NAME OF OPERATOR
Mesa Petroleum Co. ✓3. ADDRESS OF OPERATOR
P. O. Box 2009/Amarillo, TX 791894. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FSL & 1980' FEL
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:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐☐
☐
☐
☐
☐
☐
☐
☒5. LEASE
NM-20336

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME RECEIVED BY

8. FARM OR LEASE NAME
Wylie Fed Com JAN 16 19849. WELL NO.
2 O. C. D.
ARTESIA, OFFICE10. FIELD OR WILDCAT NAME
Wildcat Abo11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 7, T4S, R25E12. COUNTY OR PARISH
Chaves13. STATE
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3941' GR

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

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.)*

Commenced P&A on 1-17-84 as follows:

Set CIBP @ 3610' + 10 sx "C" (Abo perms 3660' - 3774').

Loaded hole with 9+ lb/gal mud.

Set 25 sx "C" inside 4 1/2" csg from 1000' to 900' (10 3/4" csg @ 950').

Set 10 sx "C" inside 4 1/2" csg from 100' to surface.

Set 200 sx "C" with 1" tubing at 600' to surface in 4 1/2" - 10 3/4" annulus.

Installed dry hole marker. Well is P&A 1-17-84.

NOTE: Well originally named the Willow Creek Unit #7.

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

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

SIGNED R. E. Martin TITLE Regulatory Coordinator DATE 1-18-84

APPROVED

(This space for Federal or State office use)

APPROVED BY (Orig. Sgd.) PETER W. CHESTER

TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

FEB 14 1984

XC: BLM-R(0+6), GEN RCDS, ACCTG, GAS CONT, ENG, PROD RCDS(FILE), MIDLAND,
ROSWELL, PARTNERS

*See Instructions on Reverse Side