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RECEIVED
CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87200
8-16-81

O. C. D.
ARTESIA, OFFICE

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. LG- 9581
7. Unit Agreement Name
8. Farm or Lease Name INDIAN STATE
9. Well No. 1
10. Field and Pool, or Wildcat WILDCAT
12. County DEBACA

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO LIFT OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT TO DRILL" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL ☐ GAS WELL ☒ OTHER ☐

Name of Operator
MESA PETROLEUM CO. /

Address of Operator
1000 VAUGHN BUILDING/MIDLAND, TEXAS 79701

Location of Well
UNIT LETTER 0, 660 FEET FROM THE SOUTH LINE AND 1980 FEET FROM THE EAST LINE, SECTION 22 TOWNSHIP 1S RANGE 21E N.M.P.M.

15. Elevation (Show whether DF, RT, GR, etc.)
4513' GR

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

INFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☒

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.

Commenced plugging well on 8-14-81. Set plug at PBTD of 3810' to 2497' with 100 sx "C" + 2% CaCl, then set 30 sx "C" + 2% CaCl at 1600' and 30 sx "C" + 2% CaCl from 400' to surface. Installed dry hole marker. NOTE: Set 100 sx "C" + 2% CaCl down backside of 8 5/8" casing from 468' to surface - circulated 10 sx. Cement job witnessed by M. Stubblefield / NMOCD.

Well P & A'd - 8-15-81.

C: NMOCD (3), TLS, CEN RCDS, ACCTG, MEC, LAND, ROSWELL, FILE

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

by R. F. Nash TITLE REGULATORY COORDINATOR DATE 8-17-81

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: