

Revised 10-1-78

OIL CONSERVATION DIVISION
P.O. BOX 2088
SANTA FE, NEW MEXICO 87501

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OPERATOR		

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
LG-740	

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Mesa Operating Limited Partnership	8. Farm or Lease Name VACUUM STATE
3. Address of Operator P.O. Box 2009, Amarillo, Texas 79189	9. Well No. 3
4. Location of Well UNIT LETTER <u>C</u> <u>660</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM THE <u>West</u> LINE, SECTION <u>10</u> TOWNSHIP <u>19S</u> RANGE <u>35E</u> NMPM.	10. Field and Pool, or Wildcat Scharb Bone Springs
15. Elevation (Show whether DF, RT, GR, etc.) 3844' GR	12. County Lea

16.

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

NOTICE OF INTENTION TO:

PERFORM 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 Plug Back and Reperforate ☒ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Move in and Rig up Clark Well Service 10/20/86 - Set CIBP @ 10,375' to isolate the Wolfcamp perfs; dumped 35' cement on top; loaded hole with 2% Kcl water, tested CIBP to 1000 psi, OK; perforated Bone Springs w/ 1 JSPF 8978-90' and 2 JSPF 8994-99'; RU Western and acidized with 3500 gals 15% NE-FE acid and 48 BS; made 25 swab runs, recovered 97 BLW and trace of oil; well SI on 10/24/86 pending approval from partners to plug and abandon.

xc: NMOCD (0+5), CR, Prod. Rcds, Reg, Land, Expl., Partners

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

SIGNED <u>Carelyn Cummings</u>	TITLE <u>Regulatory Clerk</u>	DATE <u>1/6/87</u>
ORIGINAL SIGNED BY <u>TERRY SEXTON</u>		
APPROVED BY <u>DISTRICT 1 SUPERVISOR</u>	TITLE _____	DATE <u>JAN 12 1987</u>
CONDITIONS OF APPROVAL, IF ANY:		

RECEIVED
JAN 9 1987
JAMES OFFICE