

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Oil Cons.  
N.M. DIV-Dist. 2  
1301 W. Grand Avenue  
Artesia, NM 88210

FORM APPROVED  
OMB No. 1004-0135  
Expires: January 31, 2004

**SUNDRY NOTICES AND REPORTS ON WELLS**  
**Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.**

**SUBMIT IN TRIPLICATE - Other instructions on reverse side**

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

McClellan Oil Corporation

3a. Address

P O Drawer 730, Roswell, NM 88202-0730

3b. Phone No. (include area code)

505/622-3200

4. Location of Well (Footage, Sec., T, R., M., or Survey Description)

660' FEL & 660' FNL, Sec. 22-T14S-R30E

5. Lease Serial No.

NM-8255

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.

Occidental Fed. No. 1

9. API Well No.

3000520410

10. Field and Pool, or Exploratory Area

East Vest Ranch Morrow

11. County or Parish, State

Chaves, NM

**12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Gas Settlement Test
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

3. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Frontier Energy Services, LLC purchases gas from the above well and has notified McClellan Oil that " Gas Measurement Department Plans to start settlement tests on gas that we purchase from outside producers beginning next month." "If you plan to have someone present to witness the test(s) please contact the Measurement Department or the Measurement Technician indicated below within two (2) weeks of receipt of this letter to arrange a test schedule date and time." "If no contact is made, we will feel free to schedule the test(s) at our convenience." "As per BLM Onshore Order 5, Sec. 3C #18 the lessee/operator has the responsibility of notifying the Authorized Officer of the BLM at least 24 hours prior to the execution of the test(s)." "Please contact the appropriate Measurement Tech to schedule a mutually acceptable day." Notice dated 03/15/2004; RE: Settlement Tests for 04/2004.

McClellan Oil Corporation does not plan to witness test and will not be scheduling. This will serve as our notice to BLM.

Contact person with Frontier is Measurement Tech: Reyes O Reyes, Phone Office (505) 676-3513, Cell (505) 361-0367. Well - McClellan Occidental Fed., Meter 06365615.

14. I hereby certify that the foregoing is true and correct  
Name (Printed/Typed)

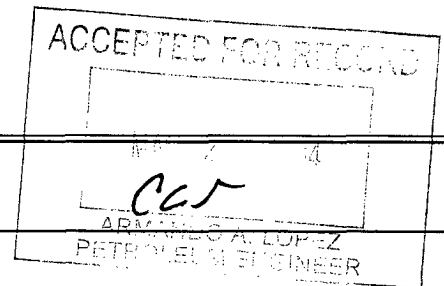
Mark McClellan

Title President

Signature

*Mark McClellan*

Date March 22, 2004



THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by (Signature)

Name

(Printed/Typed)

Title

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Date

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

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