

Artesia, NM 881

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

ckf

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" for such proposals.)

1. OIL WELL GAS WELL OTHER P & A

2. NAME OF OPERATOR McClellan Oil Corporation 505-622-3200 RECEIVED

3. ADDRESS OF OPERATOR P.O. Drawer 730 Roswell, NM 88202-0730 MAY 24 1991

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface 660' FNL & 660' FEL ARTESIA OFFICE ut. A

5. LEASE DESIGNATION AND SERIAL NO. NM-28306

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME Coyote Draw Com. Fed.

9. WELL NO. #4

10. FIELD AND POOL, OR WILDCAT Pecos Slope Also

11. SEC., T., R., M., OR BLK. AND SURVEY OR ARMA Sec 31-T7S-R25E

12. COUNTY OR PARISH Chaves 13. STATE NM

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3702' GL

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

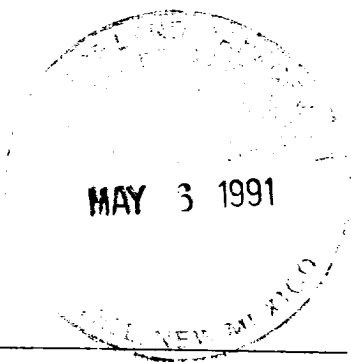
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

5/1/91 Rig up pulling unit. Set CIBP at 3620'. Dump 35' cmt on top. First jet cut done at 2800'. Csg did not come loose. Ran free point (free pipe at 2500'). Shot csg off at 2500'. Pulled 4 1/2 csg out of hole.

5/2/91 Ran 2 3/8 tbg to 2600'. Circulate hole w/heavy gel H2O. 1st plug set at 2600' to 2450' with 35 sx. Tagged at 2450'. 2nd plug - 1450-1320'. 35 sx Tagged at 1320'. 3rd plug - 60' to surface. Circulated cmt. 20 sx - all cmt Class "C" 3% CaCl.

Installed dry hole marker. No further reports until finalization report.

Post ID-2
5-31-91
P & A



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

SIGNED [Signature] TITLE Dirg. & Comp. Engineer DATE 5/3/91

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

