## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

HOT AND WHITEHALD D		11416
me, or conice decrives	13	
DISTRIBUTION	1	
BANTA FE		<u> </u>
FILE		1
U.S.O.S.		
LAND OFFICE		<u> </u>
OPERATOR		1

CIL CONSERVATION DIVISION	Form C-103		
DISTRIBUTION P. O. BOX 2088  SANTA FE SANTA FE, NEW MEXICO 87501	Revised 10-1-78		
FILE 1 /	5a. Indicate Type of Lease		
U.S.O.S.	State X Foo .		
DERATOR 4	5. State Oli & Gas Lease No.		
	LG-1082		
SUNDRY NOTICES AND REPORTS ON WELLS  THE THIS FORM FOR PROPOSALS TO DRILL ON TO DEFEN OF PLUG BACK TO A DIFFERENT RESERVED.	7. Unit Agreement Name		
ormer. Testing (Wolfcamp) 007231980	8. Farm or Lease Name		
McClellan Oil Corporation / O. C.D.	Tres Amigos		
3. Address of Operator ARTESIA, OFFICE	9. Well No.		
Post Office Drawer 730, Roswell, New Mexico 88201	1		
4. Location of Well  UNIT LETTER L 1980 FEET FROM THE SOUTH LINE AND 660 FEET FROM	10. Field and Pool, or Wildcat Wildcat		
West LINE, SECTION 9 TOWNSHIP 19-S RANGE 23-E NAPH.			
15. Elevation (Show whether DF, RT, GR, etc.)	12. County		
3971 G.L. 3982 K.B.	Eddy		
Check Appropriate Box To Indicate Nature of Notice, Report or Oth			
	REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING		
TEMPORARILY ADAHDON	PLUG AND ABANDONMENT		
PULL ON ALTER CASING CHANGE PLANS CASING TEST AND CEMENT JOB	[X]		
OTHER Testing			
OTHER			
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.			
3/28/80: Set WLBP @ 5174. Tested to 1000 psi for 10 min. Held.			
3/29/80: Perf. 2 shots/ft. 5082-90 (Wolfcamp).			
4/03/80: Acidized with 500 gals. 15% acid. Swab testing. Flowing gas and oil.			
6/11/80: Re-acidized with 2000 gals. 20% acid. Swabbed and flowed gas and oil.			
6/23/80: Installed pump-jack. Pumped decreasing amounts of oil. Gas decreased rapidly.			
8/26/80: Decision made to temporarily abandon this zone.			
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18. I horeby certify that the information above is true and complete to the best of my knowledge and belief.			
18. I hereby certify that the information above is true and complete to the best of the showing			
1. W. Collem Operator	DATE 10/20/80		
8 ICHED			
( ) W. a. Supervisor, DISTRICT II	OCT 3 0 1980		