

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

18108
c/si

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.

NM-2581

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

McClellan Fed. No. 1

9. API Well No.

30-005-60506

10. Field and Pool, or Exploratory Area

Sams Ranch

11. County or Parish, State

Chaves Co., NM

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

McClellan Oil Corporation

3. Address and Telephone No.

P O Drawer 730, Roswell, NM 88202-0730 505-622-3200

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

660' FSL & 1980' FWL Sec. 11-T14S-R28E

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

TYPE OF SUBMISSION

☐ Notice of Intent

☒ Subsequent Report

☐ Final Abandonment Notice

TYPE OF ACTION

☐ Abandonment

☐ Recompletion

☐ Plugging Back

☐ Casing Repair

☐ Altering Casing

☒ Other Shut in gas well

☐ Change of Plans

☐ New Construction

☐ Non-Routine Fracturing

☐ Water Shut-Off

☐ Conversion to Injection

☐ Dispose Water

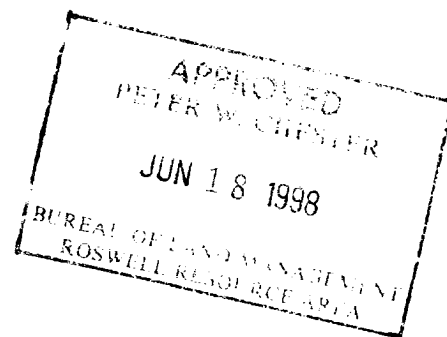
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

Pursuant to Sundry Notice dated 6/26/95 and approved 7/6/95 McClellan Oil Corporation encloses a fluid level Sonic test in satisfaction of BLM requirement for a casing integrity test. Apparently we inadvertently failed to provide the BLM with this test.

McClellan Oil Corporation requests approval for shut in status for a 5 year period on the McClellan Federal No. 1 well as we have been unable to secure a connection or gas contract from GPM.

APPROVED FOR 5 year
ENDING 6/3/2003



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

Signed Mark McClellan

Title President

Date 6/3/98

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

Date _____