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

SEP 8 1980

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease State ☐ Fee ☒
5. State Oil & Gas Lease No.
7. Unit Agreement Name
8. Farm or Lease Name Johnson Fee
9. Well No. 1
10. Field and Pool, or Wildcat Wildcat <i>also</i>
12. County Chaves

SUNDRY NOTICES AND REPORTS ON WELLS O. C. D.
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO OPEN OR PLUG BACK TO AN ADJACENT RESERVOIR.
USE "APPLICATION FOR PERMIT - 1" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL ☐ GAS WELL ☒ OTHER- 2. Name of Operator McClellan Oil Corporation 3. Address of Operator Post Office Drawer 730, Roswell, New Mexico 88201 4. Location of Well UNIT LETTER <u>L</u> <u>1980</u> FEET FROM THE <u>South</u> LINE AND <u>660</u> FEET FROM <u>West</u> LINE, SECTION <u>30</u> TOWNSHIP <u>6-S</u> RANGE <u>26-E</u> NMPM. 15. Elevation (Show whether DF, RT, GR, etc.) 3719.7' G. L.
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Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☒	OTHER <u>Change Operator</u> ☒	CASING TEST AND CEMENT JOB ☐	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.

Request a change of Operator from Fred Pool Drilling, Inc. to McClellan Oil Corporation.

Survey plats on file with original notice of intention to drill.

The running of intermediate casing will be optional. If intermediate casing is not run, surface casing will be set at 450'.

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

SIGNED <u>Joe J. McClellan</u>	TITLE <u>Operator</u>	DATE <u>9/05/80</u>
APPROVED BY <u>W. A. Gressett</u>	TITLE <u>SUPERVISOR, DISTRICT II</u>	DATE <u>SEP 9 - 1980</u>

CONDITIONS OF APPROVAL, IF ANY:

Intermediate casing required