

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☒ gas ☐ other ☐  
well well

2. NAME OF OPERATOR

McClellan Oil Corporation ✓

3. ADDRESS OF OPERATOR

P.O. Drawer 730, Roswell, NM 88202

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 1980' FNL & 660' FWL

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
CHANGE ZONES ☐  
ABANDON\* ☐  
(other) ☐

SUBSEQUENT REPORT OF:

☐  
☐  
☒  
☐  
☐  
☐  
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☐  
☐

5. LEASE

NM-17218

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

RECEIVED

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Paula Federal

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 12-T14S-R28E

12. COUNTY OR PARISH 13. STATE

Chaves

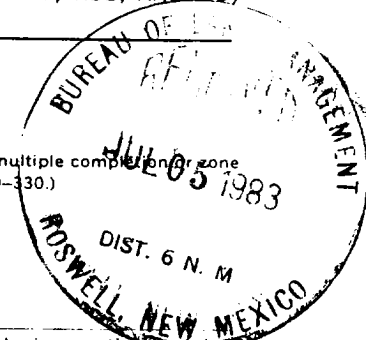
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

3618' G.L.

(NOTE: Report results of multiple completion or zone change on Form 9-330.)



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.)\*

1-28-83: Perfed 2933,34,35,40,41,42 with 2 JSPF. Acidized with 1500 gals. 20% NEFE. Swabbed dry. Set CIBP at 2900'.

1-29-83: Perfed 2798,2800,02,04,06,08,10,12 with 1 JSPF. Acidized with 1500 gals. 20% NEFE. Swabbed formation water. Set CIBP at 2790'.

2-1-83: Perfed 2745,46,47,48,56,57,58,59. Acidized with 1500 gals. 20% NEFE. Swabbed dry.

2-2-83: Set CIBP at 2650'. Perfed 1872,73,74,81,82,83,84,85,86,95,96,97,98. Acidized with 4000 gals. 7-1/2% Morrow Flo acid. Swabbed load. Good show of gas.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED Karl Sagsdale TITLE Operations Manager DATE 6-29-83

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

ACCEPTED FOR RECORD

JP  
JUL 14 1983

\*See Instructions on Reverse Side

ROSWELL, NEW MEXICO