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O. C. D.

ARTESIA, OFFICE

NM OIL CONS. COM. SECTION
Drawer DD
Artesia, NM 88210

Form Approved.
Budget Bureau No. 42-R1424

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 ☐

2. NAME OF OPERATOR

McClellan Oil Corporation

3. ADDRESS OF OPERATOR

P.O. Drawer 730, Roswell, NM 88201

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

AT SURFACE: 1980' FSL & 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:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) Surface casing & cement ☐

5. LEASE

NM-11596

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

PJ Fed.

9. WELL NO.

4

10. FIELD OR WILDCAT NAME

South Pecos Slope Abo

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

Sec. 7-T9S-R26E

12. COUNTY OR PARISH

Chaves

13. STATE

NM

14. API NO.

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

3686' 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.)*

11/27/84: Spud well with 12-1/4" bit.

11/28/84: TD surface at 925'. Ran 916' of 8-5/8" 24# casing. Cemented with Western using 300 sx Pacesetter Lite, 2% CaCl, 1/4# Flocele, 200 sx Class "C" 2% CaCl. Plug down at 1:45 pm. Circulated 150 sx cement. WOC - 18 hours. Drill out with 7-7/8" bit. Waited 4 hours, Nipped up BOP's. Tested to 1000 psi for 30 min.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Peter W. Chester TITLE Dring. Engineer DATE 11/29/84

APPROVED BY
CONDITIONS OF

ACCEPTED FOR RECORD (This space for Federal or State office use)
PETER W. CHESTER
DEC 6 1984

TITLE

DATE

*See Instructions on Reverse Side