

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
N. M. OIL COND. COMMISSION
HOBBS, NEW MEXICO 88240

Form approved.
Budget Bureau No. 1004-0145
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM-8431

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	RECEIVED DEC 01 '87	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
2. NAME OF OPERATOR McClellan Oil Corporation	O. C. O. ARTESIA OFFICE	7. UNIT AGREEMENT NAME
3. ADDRESS OF OPERATOR P.O. Drawer 730, Roswell, NM 88202		8. FARM OR LEASE NAME Penjack Federal
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FSL & 660' FWL		9. WELL NO. 6
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, CR, etc.) 3790' G.L.	10. FIELD AND POOL, OR WILDCAT Pecos Slope Abo
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 7-T10S-R26E
		12. COUNTY OR PARISH Chaves
		13. STATE NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Set 4 1/2" casing	
(Other)		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

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.)*

11/20/87: TD at 4690'.

11/21/87: Rig up Schlumberger. Ran CNL-LDT-DLL & MSFL logs.

11/22/87: Ran 4641' (114 joints) of 10.5 lb, 4 1/2", J-55 casing. Cemented with 300 sx 65/35 Poz Class C, .3% CFR-3, .4% Halad 4, 5 lb salt. Plug down at 10:30 am 11/21/87.

No further reports until completion is attempted.

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

SIGNED

Mike Lee

TITLE Drilling Engineer

DATE 11/23/87

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
PETER W. CHESTER

DATE

NOV 24 1987

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

*See Instructions on Reverse Side

RECEIVED

MAY 25 1981

OCD
HOBBBS OFFICE