

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
NM Oil Cons Commission  
Artesia, NM 88210

Form approved,  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

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SUNDRY NOTICES AND REPORTS ON WELLS RECEIVED

(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		DEC 11 '87	
2. NAME OF OPERATOR McClellan Oil Corporation ✓		O. C. D.	
3. ADDRESS OF OPERATOR P.O. Drawer 730, Roswell, N.M. 88201		ARTESIA, OFFICE	
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		5. LEASE DESIGNATION AND SERIAL NO NM-8431	
14. PERMIT NO.		7. UNIT AGREEMENT NAME	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3790 G.L.		8. FARM OR LEASE NAME Penjack Fed.	
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		9. WELL NO. 6	
NOTICE OF INTENTION TO:		10. FIELD AND POOL, OR WILDCAT U.D. Pecos Slope Abo	
SUBSEQUENT REPORT OF:		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 7-T10S-R26E	
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"/>		12. COUNTY OR PARISH Chaves	
FRACTURE TREAT <input type="checkbox"/> MULTIPLE COMPLETE <input type="checkbox"/> FRACTURE TREATMENT <input checked="" type="checkbox"/> ALTERING CASING <input type="checkbox"/>		13. STATE NM	
SHOOT OR ACIDIZE <input type="checkbox"/> ABANDON* <input type="checkbox"/> SHOOTING OR ACIDIZING <input checked="" type="checkbox"/> ABANDONMENT* <input type="checkbox"/>			
REPAIR WELL <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> (Other) <input type="checkbox"/>			

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.)\*

12/1 Perfed 4285 - 4288, 4308 - 4317, 4418 - 28½ w/18 holes  
Acidized w/1000 gals 10% NEFE from 4418 - 28½

12/2 Acidized w/1000 gals 10% NEFE from 4285 - 4317 Frac treated  
4285 - 4428½ w/40,000 gals gel water and 47,000 lbs. 20 - 40  
sand & 12,400 lbs 12-20 sand.

12/3 Ran 2 3/8" tubing to 4243. Swabbed back frac load.

12/4 Well flowed gas & load water to pit.

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

SIGNED Paul Tagdale

TITLE Operations Manager

DATE 12/8/87

(This space for Federal or State office use)

ACCEPTED FOR RECORD  
PETER W. CHESTER

DATE

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DEC 9 1987

BUREAU OF LAND MANAGEMENT  
ROSWELL RESOURCE AREA

\*See Instructions on Reverse Side