

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRI
(Other instructio
verse side)TE*
OF re-Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 0556543

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

CARTEL FEDERAL

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

WILDCAT

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

SEC. 24-T15S-R29E

12. COUNTY OR PARISH 13. STATE

CHAVES

N. M.

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 ☐GAS
WELL ☐

OTHER

RE-ENTRY

2. NAME OF OPERATOR

JACK L. McCLELLAN ✓

3. ADDRESS OF OPERATOR

P. O. Box 848, ROSWELL, NEW MEXICO 88201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)

At surface

1980' FS & EL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, OR, etc.)

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐

(Other)

PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐

(Other)

REPAIRING WELL ☐ALTERING CASING ☐TEMP. ABANDONMENT* ☒(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.)*

THIS WELL WAS TEMPORARILY ABANDONED JANUARY 18, 1969. THE WELL HAS BEEN CLOSED AT SURFACE WITH A SWEDGE AND VALVE. PRODUCTION AND DRILLING ACTIVITY ARE APPROACHING THIS WELL AT THIS TIME AND THERE IS A POSSIBILITY I WILL RE-ENTER THIS WELL FOR A SQUEEZE AND RE-ATTEMPT AT COMPLETION IN THE QUEEN FORMATION.

IT IS REQUESTED THAT THIS WELL REMAIN ON A TEMPORARILY ABANDONED STATUS.

RECEIVED

AUG 27 1969

D. C. C.
ARTESIA, OFFICE

RECEIVED

AUG 25 1969

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED

J. L. McClellan

TITLE

OPERATOR

DATE

8/22/69

(This space for Federal or State Office Use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

AUG 26 1969

H. L. BECKMAN

ACTING DIRECTOR

TITLE

DATE

*See Instructions on Reverse Side