

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

U. S. PATENT AND MINE
LC 3239200-3

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to complete new wells in an ancient reservoir.
Use "APPLICATION FOR PERMIT" for such projects.)

1. NAME OF OPERATOR JACK L. McCLELLAN		7. UNIT ABBREVIATION NAME
2. ADDRESS OF OPERATOR Box 848, Roswell, New Mexico, 88201		8. NAME OF LAND OWNER LISA "B" FEDERAL
3. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. Use any space left below.) 660' FSL & 660' FWL		9. WELL NO. 2
14. PERMIT NO.		10. FIELD AND ZONE, OR WILDLIFE SULIMAR
15. ELEVATIONS (Give elevation of well in feet) 3940' G. L.		11. COUNTY OF PLANTING, TO BE FILL CHAVES NEW MEXICO

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT ON:	
TEST WATER SHUT-OFF	☐	WELL SHUT-OFF	☐
FRACTURE TREAT	☐	FRACTURE TREATMENT	☐
SHOOT OR ACIDIZE	☐	SHOOTING OR ACIDIZING	☐
REPAIR WELL	☐	(Other)	☐
(Other)	☐	(Other)	☐
PULL OR ALTER CASING	☐	REPAIRING WELL	☐
MULTIPLE COMPLETE	☐	ALTERING CASING	☐
ABANDON*	☐	TEMP ABANDONMENT	☐
CHANGE PLANS	☐		

17. Submitting Proposals for Completed Operations (Clearly state the nature of the work, and give pertinent data, including, but not limited to, the following: If well is directional drilled, give successive locations and measured and true vertical depths for all depths and logs (see back to this work).)

ON AUGUST 7, 1969, SPOTTED CEMENT PLUG 3300-3487' (SAN ANDRES POROSITY). SET HALLIBURTON SQUEEZE PACKER AT 2045' AND SQUEEZED 50 SX TO COVER BASE OF 7" CASING AT 2045' AND PLUG BACK FOR RECOMPLETION ATTEMPT IN QUEN SAND (2027-2030'). RAN TUBING AND RODS. TEST PUMPED 30 DAYS. TOTAL FLUID DECREASED. ACIDIZED WITH 1000 GALS. ACID. TESTED UNTIL NOVEMBER 10, 1969. WELL PUMPED 75 BARRELS OF WATER AND 4 BARRELS OF OIL. PULLED TUBING AND RODS. CAPPED WELL FOR USE AS A WATER INJECTION WELL WHEN FLOODING OCCURS IN THE SULIMAR FIELD.

TEMPORARILY ABANDONED.

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

SIGNED

TITLE

OPERATOR

DATE 1/24/69

(This space for Federal or State Official Use)

APPROVED

TITLE

DATE

Signature of Approver, if any:

*See Instructions on Reverse Side