

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 42-R1424.

6. LEASE DESIGNATION AND SERIAL NO.
NM 0199827

7. IF INDIAN, ALLOTTED OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
SUE FEDERAL

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT
WILDCAT

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

SEC. 6-T15S-R30E

12. COUNTY OR PARISH
CHAVES

13. STATE
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 ☐

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

660' FS & 1650' FWL

14. PERMIT NO.

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

3899' G. L.

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) OIL STRING

REPAIRING WELL ☐
ALTERING CASING ☐
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.)*

ON AUGUST 24, 1969, RAN 2020' OF J-55, USED, 14#, 5 1/2" CASING, CEMENTED WITH 150 SACKS.

HALLIBURTON PERFORMED THE CEMENT JOB.

RECEIVED

AUG 27 1969

G. C. C.
ARTESIA, OFFICE

RECEIVED
AUG 26 1969
U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED

Jack L. McClellan

TITLE

OPERATOR

DATE

8/25/69

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

ACTING District Engineer

AUG 26 1969
Date

*See Instructions on Reverse Side