

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

NMOCC COPY

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

copy to SF

Form approved.
Budget Bureau No. 42-R1424.

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.)

<p>1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>WIW</u></p> <p>2. NAME OF OPERATOR <u>McClellan Oil Corporation</u></p> <p>3. ADDRESS OF OPERATOR <u>P. O. Box 848, Roswell, New Mexico 88201</u></p> <p>4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <u>330' FSL & 1650' FEL</u></p> <p>14. PERMIT NO.</p>	<p>5. LEASE DESIGNATION AND SERIAL NO. <u>LC-069280-B</u></p> <p>6. IF INDIAN, ALLOTTEE OR TRIBE NAME</p> <p>7. UNIT AGREEMENT NAME <u>Sulimar Queen Unit</u></p> <p>8. FARM OR LEASE NAME <u>TRACT II</u></p> <p>9. WELL NO. <u>3</u></p> <p>10. FIELD AND POOL, OR WILDCAT <u>Sulimar Queen</u></p> <p>11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <u>Sec. 13-T15S-R29E</u></p> <p>12. COUNTY OR PARISH <u>Chaves</u> 13. STATE <u>New Mexico</u></p>
<p>15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>3950' GR</u></p>	

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APR 28 1977

O. C. C.
ARTESIA, OFFICE

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <u>Convert to WIW</u>	<u>XX</u>

(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.)*

September 6, 1974: Loyd Well Service rigged up, warehoused rods, tagged bottom with tubing and pulled. Ran 4½" Howco R-4 packer, 64 joints of tubing, set packer at 1968'. Started injecting water into well at rate of 100 barrels per day.

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U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

POSTED
ID-3
convert to WIW
4-29-77

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

SIGNED [Signature] TITLE Operator DATE 4/26/77

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE ACTING DISTRICT ENGINEER DATE APR 27 1977

CONDITIONS OF APPROVAL, IF ANY: