

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE
(Other instructions
reverse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC 069280-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

LISA "A" FEDERAL

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

SULIMAR-QUEEN

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

SEC. 24-15S-29E

12. COUNTY OR PARISH

CHAVES

13. STATE

NEW MEXICO

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. MCCLELLAN3. ADDRESS OF OPERATOR
Box 848, ROSWELL, NEW MEXICO 882014. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

1980' FN & WL

14. PERMIT NO.

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

3933' 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) 5 1/2" CASING

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 perti-
nent to this work.)*

ON MARCH 31, RAN 2005' OF NEW, J-55, 14 LB., 5 1/2" CASING. TOTAL DEPTH IS
2008'. CEMENTED WITH 150 SACKS. HALLIBURTON PERFORMED THE WORK. WILL
TEST PLUG AND COMPLETE.

RECEIVED

APR 3 1969

C. C. C.
ARTESIA, OFFICERECEIVED
APR - 2 1969
U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED

TITLE

OPERATOR

DATE

4/01/69

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

APR - 2 1969
R. L. BEEKMAN
ARTESIA, NEW MEXICO

*See Instructions on Reverse Side