

Form 100-5
(November 1985)
(Previously 10-3-1)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
NM Oil Cons. Comm. Division
Drawer DD

SUBMIT IN TRIPPLICATE

(Other Instructions on Reverse Side)

Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

LC-069820-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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. WELL TYPE: ☐ GAS WELL ☐ OTHER Waterflood

2. NAME OF OPERATOR

McClellan Oil Corporation

3. ADDRESS OF OPERATOR

P.O. Drawer 730, Roswell, NM 88202

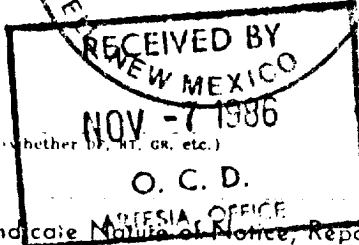
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)

At surface

See Below 330/S 660/W

14. PERMIT NO.

15. ELEVATIONS (Show whether ft., mt., gr., etc.)



7. UNIT AGREEMENT NAME

Sulimar Queen Unit

8. FARM OR LEASE NAME

Tracts 1

9. WELL NO.

See below # 7

10. FIELD AND POOL, OR WILDCAT

Sulimar Queen

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

Sec. 24-T15S-R29E

12. COUNTY OR PARISH 13. STATE

Chaves

NM

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

REPAIR TREAT

MULTIPLE COMPLETION

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

(Other) Temporary Abandonment X

(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.)

The following wells have been temporarily abandoned since June 1985. We request a one year extension of this status due to uneconomic conditions. All wells passed the N.M.O.C.D. annular casing survey tests.

Tract I	Well #	Unit
	5	N
	6	L
	7	M
	10	N
	12	C
	13	M
	14	K
Tract III	6	O

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

SIGNED:

Paul Regalado

TITLE

Operations Manager

DATE

10/13/86

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

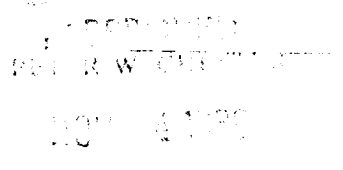
APPROVAL BY STATE

TITLE

APPROVED FOR 12-MONTH PERIOD

ENDING NOV 4 1987

See Instructions on Reverse Side



This is U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make any false, fictitious or fraudulent statements or representations as to any matter within the jurisdiction of the United States.