2. NAME OF OPERATOR

## **TED STATES** DEPARTMENT OF THE INTERIOR (Other instruction verse side) **GEOLOGICAL SURVEY**

SUBMIT IN TRI :ATE\*

Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

LC 069280-C

SINDRY	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.)

DRY HOLE

_	7. UNIT AGREEMENT NAME
_	8. FARM OR LEASE NAME
	LISA "C" FEDERAL

JACK L McCLELLAN 3. ADDRESS OF OPERATOR

Box 848, Roswell, New Mexico, 88201

OTHER

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

660' FEL & 1980' FSL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3937' G. L.

SULIMAR / 11. SEC., T., R., M., OR BLK. AND SURVEY OR ARBA

10. FIELD AND POOL, OR WILDCAT

SEC. 24-T15S-R29E

12. COUNTY OR PARISH 13. STATS NEW MEXICO CHAVES

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

WATER SHUT-OFF FRACTURE TREATMENT

SHOOTING OR ACIDIZING

SUBSEQUENT REPORT OF:

9. WELL NO.

REPAIRING WELL ALTERING CARING ABANDON MENT®

(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 proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and somes per next to this work.) \*

PROPOSE TO PLUG AND ABANDON THIS TEST AS FOLLOWS:

CEMENT PLUG AT T. D. TO COVER QUEEN SAND.

100' CEMENT PLUG TO COVER BASE OF SALT.

100' CEMENT PLUG TO COVER TOP OF SALT.

100' CEMENT PLUG AT BASE OF SURFACE CASING.

O SX PLUG AT SURFACE WITH MARKER.

HEAVY MUD BETWEEN PLUGS.

NOV251969 **U. S. G**\$0) o ARTESIA

18. I hereby certify that the source is true and corre	OPERATOR	DATE 11/24/69
(This space for Federal or State off 20 234)  APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE
5220.1-	'See Instructions on Reverse Side	e de la Servició de la Ligação de la Companya de l La Companya de la Companya de
A C. D.		