

UNITED STATES DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
Artesia, NM 88210

Budget Bureau No. 1004-0135  
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM 0556543

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. OIL WELL ☐ GAS WELL ☐ OTHER Dry - P & A

RECEIVED

2. NAME OF OPERATOR

McClellan Oil Corporation

DEC 29 '88

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

O.C.D.  
ARTESIA OFFICE

330 FSL & 330 FEL

14. PERMIT NO.

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

3938' G.L.

7. UNIT AGREEMENT NAME

Sulimar Queen Unit

8. FARM OR LEASE NAME

Tract 7

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Sulimar Queen

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

Sec. 23-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

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON\*

SHOOTING OR ACIDIZING

ABANDONMENT\*

REPAIR WELL

CHANGE PLANS

(Other) Surface reclamation complete

(Other)

(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.)

FINAL ABANDONMENT NOTICE:

12/15/88: Reporting that the surface reclamation is complete per your letter of 12/13/88.

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

SIGNED John E. Kragdale

TITLE Operations Manager

DATE 12/15/88

(This space for Federal or State office use)

APPROVED BY /s/ John Crane

TITLE Super. Minerals Resource Spec. DATE 12-21-88

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side