

N. M. O. C. C. COPY
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
SUBMIT IN TRIPLICATE*
(Other instruction
verse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-0458356

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.

RECEIVED

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME SULIMAR QUEEN UNIT
2. NAME OF OPERATOR McCLELLAN O L CORPORATION ✓	8. FARM OR LEASE NAME TRACT IV
3. ADDRESS OF OPERATOR P. O. Box 848, ROSWELL, NEW MEXICO 88201	9. WELL NO. 2
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 990' FNL & 1650' FEL	10. FIELD AND POOL, OR WILDCAT SULIMAR QUEEN
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SEC. 26-T15S-R29E
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3933' GR	12. COUNTY OR PARISH CHAVES
	13. STATE NEW MEXICO

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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☐

PULL OR ALTER CASING

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☐
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☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other) CONVERT OIL WELL TO INJECTION WELL

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☐
☐

REPAIRING WELL

☐
☐
☐

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

ALTERING CASING

ABANDONMENT*

(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.)*

PROPOSE TO CONVERT TO INJECTION WELL BY SETTING TENSION PACKER APPROXIMATELY
50' ABOVE THE PERFORATIONS AND LOAD ANNULUS WITH TREATED WATER.

RECEIVED

MAR 20 1974

U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED

Jack L. McClellan

OPERATOR

DATE

3/19/74

(This space for Federal or State office use)

TITLE

Subject to N.M.O.C.C. approval

DATE

APPROVED

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

MAR 20 1974

R. L. BEEKMAN
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side