

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN THE
(Other instructions on reverse side)Form approved.
Budget Bureau No. 42-B1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 0284972

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

YATES "BB" *Federal*

9. WELL NO.

2

10. FIELD AND, POOL, OR WILDCAT

SULIMAR QUEEN

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

Sec. 27-T15S-R29E

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. MCCLELLAN

3. ADDRESS OF OPERATOR

P.O. BOX 848, ROSWELL N.M. 88201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)
At surface

330' FNL and 1650' FWL

14. PERMIT NO.

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

3940' 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) Setting Surface 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 pertinent to this work.)*

5-16-70

SET 8 5/8" 20# J-55 Casing st 308'. Cemented with 50 Sacks cement.

5-17-70: Drilled plug. Tested one hour, No water. Drilling ahead.

DENTON OIL WELL CEMENTING COMPANY PERFORMED THE ABOVE OPERATIONS

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

SIGNED

Gene Milford

TITLE

PROD. Supt.

DATE

5-18-70

(This space for Federal or State use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

ACCEPTED FOR RECORD PURPOSES
MAY 19 1970
Date
ACTING District Engineer

*See Instructions on Reverse Side

RECEIVED
MAY 19 1970
U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO