SIGNED (This pace for Perf	the John sing is true and correct SMECOLO TITLE TITLE TITLE PEROVAL, IF ANY:	Operator	DATE 9/14/70
3. I hereby cartify that	3.9M&COLOL TITLE		9/14/70
I hereby cartify that	2 0N 6 CO D D		9/14/70
Set ma			SEP 1.7 970 SEP 1.
Set ma			SEP17 970
Set ma			RECEIT 970 SEP17 970 SEP17 970 SEP17 970
Set ma			RECEIT 970
Set ma			_CCE 10
Set ma			
-	arker & clean location.	• .	
20' pl	lug @ surface. Heavy mud betwe	en plugs.	
100° p	olug @285 (In & out base of 85	.	
100° p	olug @ 880 (Base Salt)	\$0? •	2 1 1970
_	olug @T.D.		
•	_	REC	EIVED
Property to	olug & abandon this test as fo	allove.	
proposed work. If nent to this work.)	well is directionally drilled, give subsurface loca	ations and measured and true vertice	cal depths for all markers and zones perti-
(Other)	R COMPLETED OPERATIONS (Clearly state all pertine)	Completion or Recomp	s of multiple completion on Well pletion Report and Log form.) including estimated date of starting any
SHOOT OR ACIDIZE REPAIR WELL	ABANDON* X CHANGE PLANS	(Other)	ABANDONMENT*
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
TEST WATER SHUT-O	NOTICE OF INTENTION TO: PULL OR ALTER CASING	SUBSEQ WATER SHUT-OFF	UENT REPORT OF:
	Check Appropriate Box To Indicate N		•
	3828 G.L.		Chaves N. M.
PERMIT NO.	15. ELEVATIONS (Show whether DE	F, RT, GR, etc.)	Sec. 4-T15S-R29E 12. COUNTY OR PARISH 13. STATE
66	60' FNL & 660' FEL		SURVEY OR ARMA
At surface	· · · · · · · · · · · · · · · · · · ·		Wildcat 11. SEC., T., R., M., OR BLK. AND
P. O. Box 848, Roswell, New Mexico 88201 Location of Well (Report location clearly and in accordance with any State requirements.* See also space 17 below.)			10. FIELD AND POOL, OR WILDCAT
ADDRESS OF OPERATOR			9. WELL NO.
NAME OF OPERATOR	ack L. McClellan /		8. FARM OR LEASE NAME Mark Federal "A"
WELL WELL	OTHER Dry Hole		, Chil Avadamani Mana
OIL GAS	form for proposals to drill or to deepen or plug Use "APPLICATION FOR PERMIT—" for such p	back to a different reservoir.	7. UNIT AGREEMENT NAME
OIL GAS	DRY NOTICES AND REPORTS	- · · · · · · · · · · · · · · · · · · ·	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
(Do not use this	THE TOTAL CONTROL		NM0239738
(Do not use this	DEPARTMENT OF THE INTER	IOI(verse side)	5. LEASE DESIGNATION AND SERIAL NO.