

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIP DATE  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC - 069280-B

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  GAS WELL  OTHER  Dry Hole

APR 12 1976

2. NAME OF OPERATOR  
McClellan Oil Corporation

3. ADDRESS OF OPERATOR  
P. O. Box 848, Roswell, New Mexico 88201

**O. C. C.**  
ARTESIA, OFFICE

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

990' FSL & 1650' FEL

7. UNIT AGREEMENT NAME  
Tract II  
Sulimar Queen Unit

8. FARM OR LEASE NAME  
Tract II  
Sulimar Queen Unit

9. WELL NO.  
6

10. FIELD AND POOL, OR WILDCAT  
Sulimar Queen

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

Sec. 13-T15S-R29E

14. PERMIT NO.

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

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 <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
(Other) <input type="checkbox"/>	

(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.)\*

July 29, 1974: This well has been plugged and abandoned as follows:  
 100' cement plug 2050' - 1950' (Top of Queen)  
 100' cement plug 380' - 480' (Top of Salt)  
 20' cement plug at surface.

You will be notified when location has been cleaned and is ready for inspection.

**RECEIVED**  
JUL 30 1974  
U. S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

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

SIGNED Jacob L. McClellan TITLE President DATE July 29, 1974

(This space for Federal or State office use)

**APPROVED**  
APPROVED BY: [Signature]  
CONDITIONS OF APPROVAL, IF ANY:  
DATE: APR 29 1976  
H. L. BEEKMAN  
ACTING DISTRICT ENGINEER

\*See Instructions on Reverse Side