| NO. OF COPIES RECEIVED | RECEIVED | Form C-103 |
|---|---|--|
| DISTRIBUTION | | Supersedes Old C-102 and C-103 |
| SANTA FE | NEW MEXICO OIL CONSERVATION COMMISSION SEP - 8 1978 | Effective 1-1-65 |
| FILE / | 3EP - 8 1978 | |
| U.S.G.S. | | Sa. Indicate Type of Lease State X Fee |
| DERATOR / | O. C. C. | State A Fee 5. State Oil & Gas Lease No. |
| 1/ 1 | ARTESIA, OFFICE | K-6772 |
| SUNDRY NOTICES AND REPORTS ON WELLS | | amanailiúink |
| (DO NOT USE THIS FORM FOR PROF USE "APPLICATION | NOTICES AND REPORTS ON WELLS OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. ON FOR PERMIT (FORM C-101) FOR SUCH PROPOSALS.) | |
| I. OIL V GAS | | 7. Unit Agreement Name |
| 2. Name of Operator | OTHER- | |
| McClellan Oil Corporation | | 8. Farm or Lease Name |
| 3. Address of Operator | | Marlisue State |
| Box 848, Roswell, New Mexico 88201 | | 3. 401.101 |
| 4. Location of Well | | 10. Field and Pool, or Wildcat |
| UNIT LETTER A 66 | 01 FEET FROM THE North LINE AND 660 FEET P | Rom Undesignated LL Queen A |
| 1 | | |
| THE LAST LINE, SECTION | 24 township 14-South RANGE 29-East | лем. () |
| mmmmmmmm | 15. Elevation (Show whether DF, RT, GR, etc.) | |
| | 3836 GL | 12. County |
| | | Chaves |
| Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: | | |
| NOTICE OF IN | SUBSEQUI | ENT REPORT OF: |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON REMEDIAL WORK | ALTERING CABING |
| TEMPORARILY ABANDON | COMMENCE DRILLING OPNS. | PLUG AND ABANDONMENT |
| PULL OR ALTER CASING | CHANGE PLANS CABING TEST AND CEMENT JOB | |
| | other Surface casi | ng 🔲 |
| OTHER | | |
| 17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed | | |
| work) SEE RULE 1103. | | |
| 8 5/8" csg. | | |
| 8/11/78: Set 374' of used 24 lb. Cemented with 125 sx.(Circulated) | | |
| | | |
| 8/12/78: Drilled out plug. Tested 30 min. no fluid. | | |
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| | | |
| 10 I horobu contifu that the information | house in terms and associate to the board of | |
| 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. | | |
| SIGNED JONE J. ME Cal | On One of the One | 0/15/70 |
| SIGNED | You TITLE Operator | DATE 8/15/78 |
| | | |

SUPERVISOR, DISTRICT II

SEP 1 1 1978