

45F

NM OIL CONS. COMMISSION

Drawer DD

Artesia, NM 88210

Form 9-331
(May 1983)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-25638

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Clarkyle Federal

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat - *San Andres*

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

Sec. 23-T15S-R29E

12. COUNTY OR PARISH

Chaves

13. STATE

NM

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

McClellan Oil Corporation ✓

3. ADDRESS OF OPERATOR

P.O. Drawer 730, Roswell, NM 88202

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

660' FNL & 1980' FEL

RECEIVED BY

OCT 7 1985

O. C. D.

ARTESIA, OFFICE

14. PERMIT NO.

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

3921' 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)

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 perti-
nent to this work.)

9-16-85: Ran RBP to 3448'. Ran tubing to 3416. Ran pump and rods and
put back on pump.

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

SIGNED

TITLE Operations Manager

DATE September 25, 1985

(This space for Federal RECORDING USE ONLY)

PETER W. CHESTER

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

OCT 3 1985

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

See Instructions on Reverse Side