

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> Plug & Abandon	5. LEASE DESIGNATION AND SERIAL NO. NM-0916
2. NAME OF OPERATOR McClellan Oil Corporation	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Drawer 730 Roswell, NM 88202-0730	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Unit G 2310' FNL & 1980' FEL	8. FARM OR LEASE NAME Simmons Federal
14. PERMIT NO.	9. WELL NO. #1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3729' GL	10. FIELD AND POOL, OR WILDCAT W. Henshaw Grayburg
	11. SEC., T., R., M., OR BLK. AND SURVEY OR ARMA Sec 24-T16S-R29E
	12. COUNTY OR PARISH Eddy
	13. STATE NM

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 COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>

(Other) Finalization

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) (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.)*

8/14/91 Set CIBP at 2600' & put 35' cmt on top.
Pulled on csg. Csg showed to be stuck at 200'.

Prep to plug & abandon as per verbal with Adam Salomeh.

Perf csg w/2 holes at 1050' - mixed 35 sx cmt-3% CaCl
& displace cmt to 850'. Tag cmt at 850' w/wireline.

Perf csg at 550' - mixed 90 sx cmt - cmt circulated to
surface - cmt inside 4 1/2" - 30' down.

Will install dry hole marker, level pit, & cut anchor.

All csg left in hole.

Part FD-2
8-30-91
P&A

Approved by _____
Liability under Land is assumed until
surface restoration is completed.

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

SIGNED Michael Lee

TITLE Drlg. & Comp. Engineer

DATE 8/21/91

(This space for Federal or State office use)

Orig. Signed by Shannon J. Shaw

APPROVED BY

TITLE PETROLEUM ENGINEER

DATE 8/23/91

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

20-015-0211

(12) Simultaneous
Hypnosis Test
V

30-015-02766

(12) Simultaneous
Heard by
J