

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on reverse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-0916

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.)

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

SIMMONS FEDERAL

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

W. HENSHAW GRAYBURG

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

SEC. 24-16S-29E

12. COUNTY OR PARISH

EDDY N. M.

1.

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

JACK L. McCLELLAN

3. ADDRESS OF OPERATOR

P. O. Box 848, ROSWELL, NEW MEXICO 88201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)
At surface

2310' FS&WL

14. PERMIT NO.

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

3723 GL

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 pertinent to this work.)*

OCTOBER 30, 1967: PULLED RODS AND TUBING. RAN SAND PUMP, BAILED 10' SAND. REPLACED DOWN HOLE PUMP WITH NATIONAL THREE TUBE PUMP. REPLACED FLOAT FOR SEPARATOR. TESTED 24 HOURS, PUMPING, 5 BOPD.

REQUEST CHANGE IN ALLOWABLE. THIS WELL EXEMPT FROM BOR

RECEIVED

NOV 21 1967

U.S.G.
ARTESIA, OFFICERECEIVED
NOV 13 1967
U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

OPERATOR

DATE

11/09/67

TITLE

DATE

*See Instructions on Reverse Side