

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

5. LEASE DESIGNATION AND SERIAL NO.

NM-0916

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Simmons Fed

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

W. Henshaw Grayburg

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

Sec. 26-T16S-R29E

12. COUNTY OR PARISH 13. STATE

Eddy

NM

1. OIL ☐ GAS ☒ OTHER ☐  
WELL WELL

RECEIVED

2. NAME OF OPERATOR

McCLELLAN OIL CORPORATION

JUN 10 1992

3. ADDRESS OF OPERATOR

P.O. Drawer 730, Roswell, N.M. 88202

O. C. D.  
ARTESIA OFFICE

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

330' FNL & 330' FEL

14. PERMIT NO.

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

3698' GL

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLANS

Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT\*

(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.)\*

Fluid levels taken 6-2-92 on said well, show top of fluid is at 1581'.  
The test was witnessed by the O.C.D. of Artesia.

Pursuant to the letter from Mike Williams of the O.C.D, Rule 203 C-c is in effect. Braden Head PSI=0. The base of the salt section in this well is 996'. Since the fluid level is below the salt section and there is no Csg. leaks we request that said well be exempt from the requirements for a Bridge Plug, Packer or a Csg. Inspection Log. (d)

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

SIGNED

*Smith Lee*

TITLE

Drig. & Comp. Eng.

DATE

6-9-92

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

KELTIC SERVICES

FLUID LEVELS 6-2-92

LEASE :  
*Production*  
 CRASING  
 PRESS  
 FLUID  
 LEVEL

McCLELLAN OIL CORP	5	1333
FED #1		

McCLELLAN OIL CORP	300	1829
FED #2		

SIMMONS FED #3	230	1581
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