N. M. O. C. C. COPY

L. ED STATES SUBMIT IN TRIL ATE*

DEPARTMENT OF THE INTERIOR (Other instructions of re-Form approved. Budget Bureau No. 42-R1424. Form 9-331 (May 1963) 5. LEASE DESIGNATION AND SERIAL NO. GEOLOGICAL SURVEY LC 068677 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 plum back to a different reservoir.

Use "APPLICATION FOR PERMIT—" for such proposals | L | V E D 7. UNIT AGREEMENT NAME OIL X OTHER JAN 2 3 1973 8. FARM OR LEASE NAME NAME OF OPERATOR McCLELLAN OIL CORPORATION HINKLE FEDERAL P. O. Box 848, Roswell, New Mexico FF65201

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

See also space 17 below.)

At surface 9. WELL NO. 10. FIELD AND POOL, OR WILDCAT WILDCAT 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 660 FNL & 860 FEL SEC. 9, T-16-S, R-29-E 12. COUNTY OR PARISH | 13. STATE 14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3702' G. L. EDDY NEW MEXICO 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: PULL OR ALTER CASING WATER SHUT-OFF REPAIRING WELL TEST WATER SHUT-OFF FRACTURE TREATMENT ALTERING CASING MULTIPLE COMPLETE FRACTURE TREAT SHOOTING OR ACIDIZING ABANDONMENT* ABANDON* SHOOT OR ACIDIZE SURFACE CASING REPAIR WELL CHANGE PLANS

(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.)*

(Other)

ON 1/04/73 RAN 384' OF NEW 20 LB., 8-5/8" CASING. CEMENTED WITH 100 SX. CEMENT CIRCULATED. DRILLING 1590' THIS DATE.



18. I hereby certify that the foregoing is true and co	rrect OPERATOR	DATE 1/19/73
(This space for Fed rat or State office use) APPROVED BY CONDITIONS OF APPROVAL IF ANY:	TITLE	DATE:
ACTING DISTRICT ENGINEER	*See Instructions on Reverse Side	