

CJSF

Form 5-231
(May 1983)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

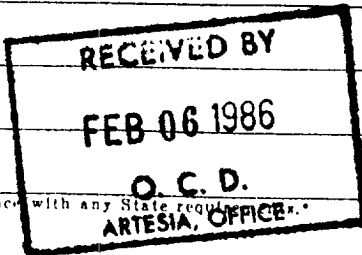
SUBMIT IN TRIPlicate*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

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	5. LEASE DERIVATION AND SERIAL NO. NM-41642
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	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State regulations. See also space 17 below.) At surface 990' FNL & 660' FWL	8. FARM OR LEASE NAME Exxon Federal
14. PERMIT NO.	9. WELL NO. 2
15. ELEVATIONS (Show whether OF, RT, GR, etc.) 3635' G.L.	10. FIELD AND POOL, OR WILDCAT High Lonesome ✓
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 28-T16S-R29E
	12. COUNTY OR PARISH Eddy
	13. STATE NM



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)

Spud

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

X

(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.)

1/29/86: Moving in Salazar rig #1.

1/30/86: Set 20' of 13-3/8" conductor.

1/31/86: Spud with 12-1/4" bit.

ACCEPTED FOR RECORD

Paul
FEB 5 1986

CARLSBAD, NEW MEXICO

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

SIGNED Paul Ragsdale ^{TR}

TITLE Operations Manager

DATE 1/31/86

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side