

90-015-25051

4-19-85

MLL-DLL-GR
1700-3544

CDL-GN-GR

SURF-3545

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

C E LaRUE & B N MUNCY JR.)

3. Address and Telephone No.

P O BOX 1370 ARTESIA, NM 88211-1370

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

560' FWL AND 660' FSL SEC 34, T18S, R30E

5. Lease Designation and Serial No.

NM27276

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

MCCLAY FEDERAL #2

9. API Well No.

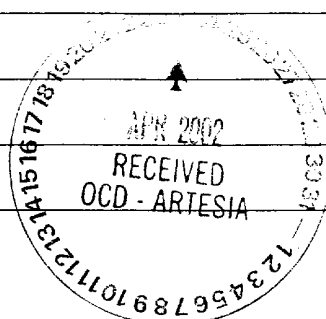
30-015-25057

10. Field and Pool, or Exploratory Area

BENSON QUEEN GRAYBURG NOI

11. County or Parish, State

EDDY NM



12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☒ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☐ Other _____
- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

SET BRIDGE PLUG 2/7/02. HEREBY REQUEST TEMPORARY ABANDONMENT STATUS. TESTED
BRIDGE PLUG 3/15/02

Accepted for record - NMOC

TA Approved For 12 Month Period
Ending 3/15/2003

RECEIVED
2002 MAR 20 AM 9:52
BUREAU OF LAND MGMT.
CARLSBAD FIELD OFFICE

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

Signed [Signature]

Title OWNER

Date 3/15/02

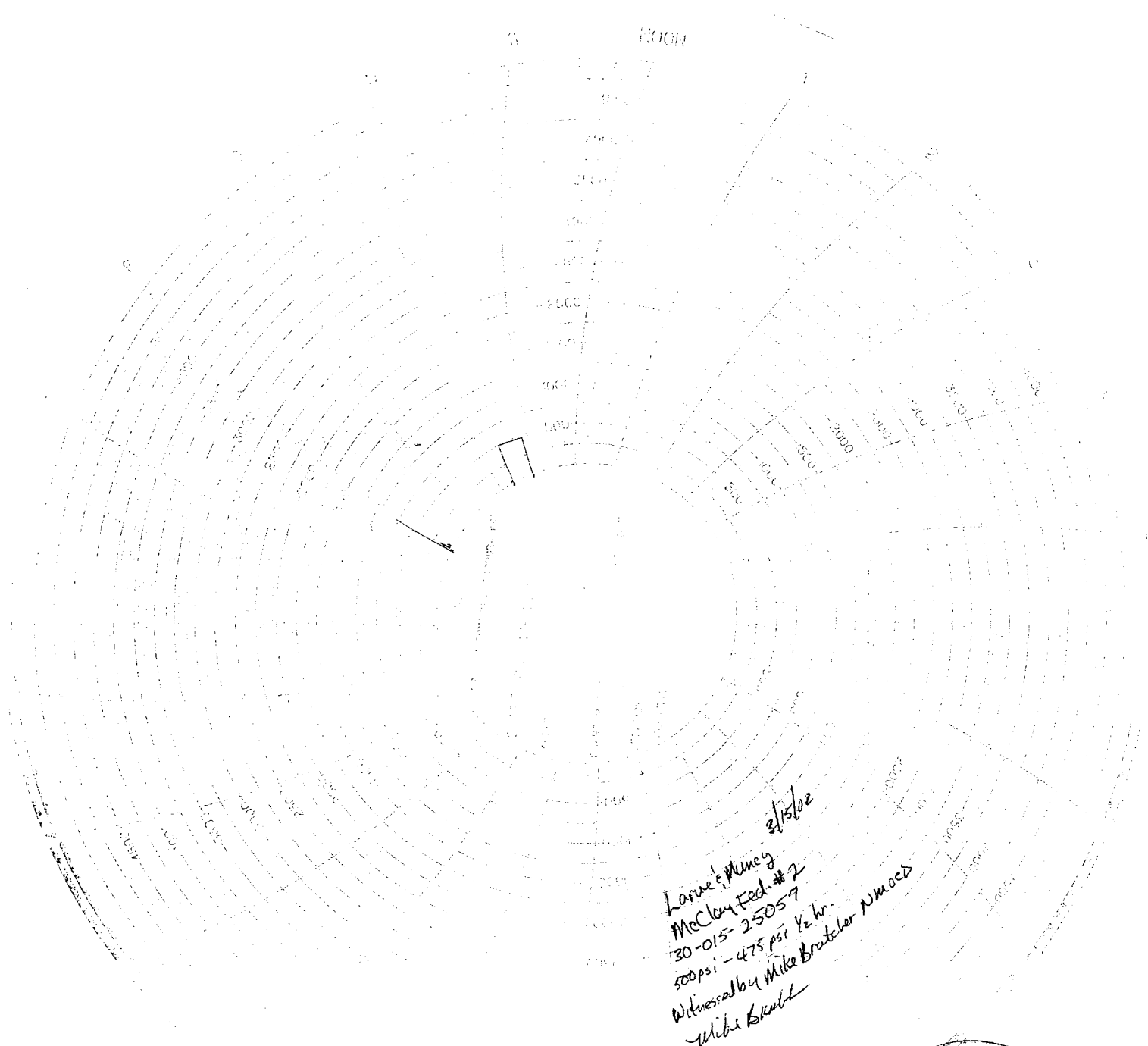
(This space for Federal or State office use)

Approved by (ORIG. SGD.) JOE G. LARA

Title Petroleum Engineer

Date 4/22/2002

Conditions of approval, if any:



P.O. Box 2735 • Phone (505) 397-5302
HOBBS, NEW MEXICO 88241

COUNTY EDDY STATE NM

ADDRESS _____

Total -		22560
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COMPANY REPRESENTATIVE

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