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LAND OFFICE	
OPERATOR	3

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. 00-643

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator JACK L. MCCLELLAN ✓	8. Farm or Lease Name MARK STATE
3. Address of Operator P. O. Box 348, ROSWELL, NEW MEXICO 88201	9. Well No. 3
4. Location of Well UNIT LETTER <u>1</u> , <u>260</u> FEET FROM THE <u>NORTH</u> LINE AND <u>1650</u> FEET FROM THE <u>EAST</u> LINE, SECTION <u>19</u> TOWNSHIP <u>19-S</u> RANGE <u>29-N</u> N.M.P.M.	10. Field and Pool, or Wildcat WILLMAN
15. Elevation (Show whether DF, RT, GR, etc.) 5512' SL	12. County LUDY

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

JULY 24, 1967: 15' CASING A 1597', CEMENTED WITH 100 SACKS.

GIVEN WORK PERFORMED BY HALLIBURTON.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED <u>J. L. McClellan</u>	TITLE <u>OPERATOR</u>	DATE <u>10/24/67</u>
APPROVED BY <u>W. A. Grossett</u>	TITLE <u>COMMISSIONER</u>	DATE <u>1</u>

CONDITIONS OF APPROVAL, IF ANY: