

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. DIV-Dist. 2
1301 W. Grand Avenue
Artesia, NM 88210

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No.
NM - 8431

6. If Indian, Allottee or Tribe Name

RECEIVED

JAN - 6 2010

NMOCG ARTESIA

SUBMIT IN TRIPLICATE - Other instructions on page 2.

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator
McClellan Oil Corporation

3a. Address
P O. Box 730, Roswell, New Mexico 88202

3b. Phone No. (include area code)
(575) 622-3200

7. If Unit of CA/Agreement, Name and/or No.

8. Well Name and No.
Ross Federal No. 5

9. API Well No.
30-005-63621

10. Field and Pool or Exploratory Area
Four Ranch Wolfcamp

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
660' FSL & 660' FEL of Section 7 - Township 10 South - Range 26 East

11. Country or Parish, State
Chaves, New Mexico

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input checked="" type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input checked="" type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

Propose the following work over procedure on the Ross Federal No. 5 well.

1. Set CIBP at 5,230'. Existing perforations are located from 5,277' to 5,280'. Dump 35' cement on top of bridge plug.
2. Perforate Wolfcamp zone from 5,030' to 5,034' with 4 shots per foot.
3. Acidize zone with 1,500 gallons 15% HCL acid with clay stabilizers.
4. Swab test zone for commercial production.

The anticipated start date for this procedure is January 4, 2010. The duration of this work over is approximately 5 days.

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)
Mark McClellan

Title President

Signature

Mark McClellan

Date 12/09/2009

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

/s/ JOHN S. SIMITZ

Title

Geologist

Date

DEC 28 2009

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon

Office

ROSWELL FIELD OFFICE

Title 18 U.S.C. Section 1001 and Title 42 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction

(Instructions on page 2)

MR