

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

NMOC  
Artesia

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.  
NMNM-62195 / NMNM-50415

6. If Indian, Allottee or Tribe Name

**SUBMIT IN TRIPLICATE** - Other instructions on page 2.

1. Type of Well  
 Oil Well     Gas Well     Other

2. Name of Operator  
THORNTON OPERATING CORPORATION

3a. Address  
PO BOX 33525, FORT WORTH, TX 76162

3b. Phone No. (include area code)  
(817) 361-1909 / (817) 966-7054

7. If Unit of CA/Agreement, Name and/or No.  
NMNM-100708, McCLELLAN FED COM (DEVONIAN)

8. Well Name and No.  
McCLELLAN FEDERAL COM 1-A

9. API Well No.  
30-005-63076

10. Field and Pool or Exploratory Area  
W KING CAMP FIELD - DEVONIAN POOL

11. Country or Parish, State  
CHAVES COUNTY, NM

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
 SURFACE LOCATION: T 13 S, R 29 E, NMPM, SEC 26: 182 FNL, 507 FWL ( on Lease NMNM-50414 )  
 BOTTOM HOLE LOC: T 13 S, R 29 E, NMPM, SEC 23: 69 FSL, 263 FWL ( on Lease NMNM-62195 )

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input checked="" type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input checked="" 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 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 recomplete 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 recompletion 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.)

5/29/2014 thru 6/27/14 - MIRU. Pull rods and tubing and find one hole in tubing. Replace joint. Tubing and rods show no signs of corrosion. Swab well and recover 136 fluid, almost all oil. Based on swab results, well appears to be capable of economic production. Hydrotest tubing going in hole. Run pump and rods. RDMO workover rig. Shut well in. Waiting on oil purchaser to pick up oil to make room in oil tank. Coordinate timing of oil sale with Mr. Bob Hoskinson, Sr of BLM to allow BLM to be present. MIRU workover rig to run casing MIT test required by BLM. Run MIT test on 6/25/14 with Mr. Hoskinson of BLM present to witness test. Casing holds 580 psi. Passes MIT (pressure chart attached). Pull out test plug. Run in hole with production tubing, pump, and rods and put well back on production to tank battery.

**NM OIL CONSERVATION**  
ARTESIA DISTRICT

JUL 28 2014

RECEIVED

Accepted for record  
APD NMOC 8-19-14

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

Name (Printed/Typed)  
ROBERT L. THORNTON

Title  
PRESIDENT

Signature  
*Robert L. Thornton*

Date  
06/27/2014

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved by  
*ISI Angel Mayes*

Assistant Field Manager,  
Lands And Minerals

Date  
7/23/14

Office  
Roosevelt Field Office

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.

Title 18 U.S.C. Section 1001 and Title 43 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.

