NM UIL CONS. COM Drawer DD	ISSION
ECEIVED BY Form 9-331 Dec. 1973 Artesia, NM 8821	. Form Approved. Budget Bureau No. 42-R1424
AN 24 1985 UNITED STATES DEPARTMENT OF THE INTERIOR O. C. D GEOLOGICAL SURVEY	5. LEASE NM-25862 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
ARTESIA, OFFICE	The second se
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 Form 9–331–C for such proposals.)	7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME NOV 2 7 1984
1. cil gas well well W other	Toles Fed.
2. NAME OF OPERATOR McClellan Oil Corporation	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR P.O. Drawer 730, Roswell, NM 88201	Pecos Slope Abo 11. sec., t., r., m., or blk. and survey or
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	AREA Sec. 15-T8S-R23E
AT SURFACE: 1980' FNL & 660' FWL	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	Chaves NM 14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	3953' G.L.
TEST WATER SHUT-OFF	(NOTE: Report results of multiple completion or zone change on Form 9–330.)
 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly statincluding estimated date of starting any proposed work. If well is dimeasured and true vertical depths for all markers and zones pertiner Propose to plug and abandon as per Peter Chesfollows: Set 50 sx cement plug at 2200' on top of fish Fill hole with mud. Pull 8-5/8" casing from 940' to surface. Set 50 sx plug at 940'. Set 50' plug at surface. Install dry hole marker. Clean and level loc 	irectionally drilled, give subsurface locations and at to this work.)* ter's verbal approval as
Subsurface Safety Valve: Manu. and Type	Set @ Ft.
18. I hereby certify that the foregoing is true and correct	11 100 100
SIGNED Kaspilal TITLE Operations Ma	падерате11/21/84
APPROVED (This space for Federal or State off APPROVED (This space for Federal or State off APPROVED Sgd.) PETER W. CHESTER CONDITIONS OF APPROVAL, IF ANY:	DATE
•See Instructions on Reverse S	Side