Form 9–331
Dec. 1973

**UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY**

SEP 28 1983
DIST. 6 N. M.
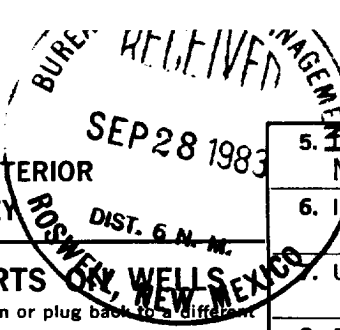
NM OIL CONS. COMMISSION
Dra DD
Artesia, Bureau

c/ S/

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.)

1. oil well ☐   gas well ☒   other

2. NAME OF OPERATOR
McClellan Oil Corporation

3. ADDRESS OF OPERATOR
P.O. Drawer 730, Roswell, N.M.

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 660' FNL & 1650' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

5. LEASE
NM-11596

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
PJ Federal Com

9. WELL NO.
2

10. FIELD OR WILDCAT NAME
South Pecos Slope

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 13-T9S-R25E

12. COUNTY OR PARISH
Chaves

13. STATE
N.M.

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3702' G.L.

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF	☐	☐
FRACTURE TREAT	☐	☐
SHOOT OR ACIDIZE	☐	☐
REPAIR WELL	☐	☐
PULL OR ALTER CASING	☐	☐
MULTIPLE COMPLETE	☐	☐
CHANGE ZONES	☐	☐
ABANDON*	☐	☐
(other) Casing & Cement		

(NOTE: Report results of multiple completion or zone change on Form 9–330.)

17. 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.)*

9/27/83: TD at 922'. Ran 922' of 8-5/8", 23 lb/ft, new casing. Cemented with 300 sx Halliburton Lite with 2% $CaCl_2$ and 200 sx Class "C" with 2% $CaCl_2$. PD at 2:30 p.m. 9/26/83. Circulate 120 sx. WOC - 18 hours. NU BOP's. Tested to 1000 psi. Drill out with 7-7/8" bit.

RECEIVED BY
SEP 30 1983
O. C. D.
ARTESIA, OFFICE
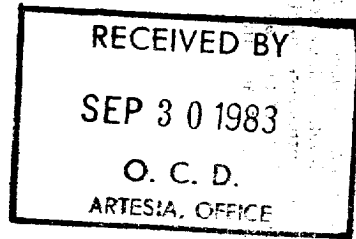
Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED _____ TITLE Operations Manager DATE September 27, 1983

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
SEP 28 1983

*See Instructions on Reverse Side

ROSWELL, NEW MEXICO