

Form 3160-5  
(June 1990)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

**SUBMIT IN TRIPLICATE**

**RECEIVED**

**AUG 09 1991**

**O. C. D.  
ARTESIA, OFFICE**

1. Type of Well  
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator  
Stevens Operating Corporation

3. Address and Telephone No.  
P. O. Box 2408, Roswell, NM 88202 (505) 622-7273

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

520' FEL, 2270' FSL Sec. 28, T-13S, R-29E

5. Lease Designation and Serial No.

NM 2824

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

McClellan Federal #3

9. API Well No.

10. Field and Pool, or Exploratory Area

Lone Wolf Devonian

11. County or Parish, State

Chaves, NM

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

**TYPE OF SUBMISSION**

- ☐ Notice of Intent  
☐ Subsequent Report  
☐ Final Abandonment Notice

**TYPE OF ACTION**

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☐ Other \_\_\_\_\_
- ☒ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)\*

After new Seismic information, the location has been moved from 2310' FSL & 530' FEL to:

2270' FSL & 520' FEL

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

Signed

*Bob Farmer*

Title

Production Superintendent

Date

July 11, 1991

(This space for Federal or State office use)

Approved by

*Shandra L. Allen*

Title

*Area Manager*

Date

8/7/91

Title 18 U.S.C. Section 1001, makes 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.

\*See Instruction on Reverse Side

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT 1

P.O. Box 1980, Hobbs, NM 88240

DISTRICTU

P.O. Drawer DD, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

## WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator <b>Stevens Operating Corporation</b>		Lease <b>McClellan Federal</b>		Well No. <b>3</b>
Unit Letter <b>I</b>	Section <b>28</b>	Township <b>13 South</b>	Range <b>29 East</b>	County <b>Chaves</b>
Actual Footage Location of Well: <b>2270</b> feet from the <b>South</b> line and <b>520</b> feet from the <b>East</b> line				
Ground level Elev. <b>3797</b>	Producing Formation <b>DEVONIAN</b>	Pool <b>LONE WOLF DEVONIAN</b>	Dedicated Acreage: <b>40</b> Acres	

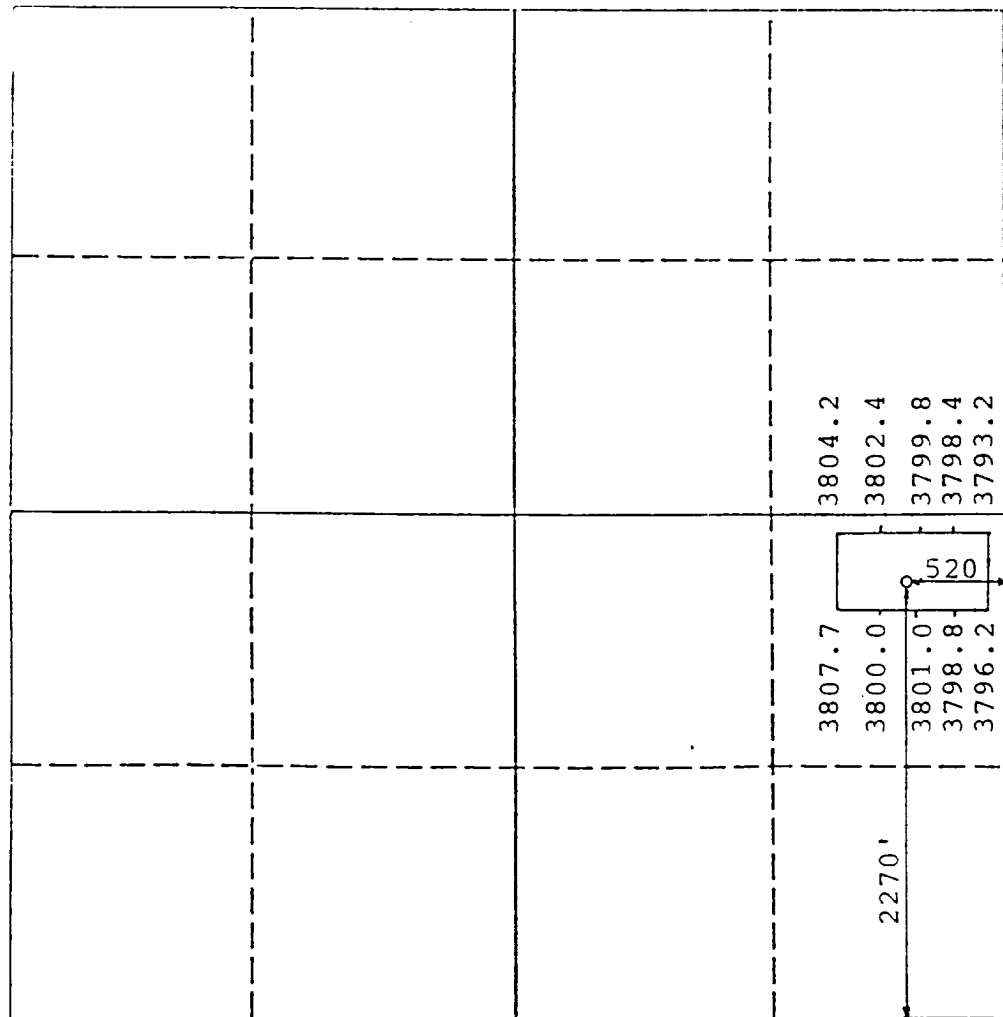
1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.

2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).

3. If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communization, unitization, force-pooling, etc.?  
☐ Yes      ☐ No      If answer is "yes" type of consolidation \_\_\_\_\_

If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary).

No allowable will be assigned to the well until all interests have been consolidated (by communization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.



OPERATOR CERTIFICATION

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

Signature Bob Farmer

Printed Name Bob Farmer

Position Production Superintendent

Company Stevens Oper. Corp.

Date 7-11-91

**SURVEYOR CERTIFICATION**

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed  
July 11, 1991

Signature & Seal of  
Professional Surveyor

**R. PATTON**  
NEW MEXICO  
8112  
REGISTERED PROFESSIONAL LAND SURVEYOR

Certificate No.  
8112