

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
El., Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87501

AUG 20 1993

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NO.
1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator McCLELLAN OIL CORPORATION		6. State Oil & Gas Lease No.
3. Address of Operator P O Drawer 730, Roswell, NM 88202-0370		7. Lease Name or Unit Agreement Name  ROSS FEE
4. Well Location Unit Letter <u>D</u> : <u>660</u> ' Feet From The <u>NORTH</u> Line and <u>660</u> ' Feet From The <u>WEST</u> Line Section <u>18</u> Township <u>8 South</u> Range <u>28 East</u> NMPM Chaves County		8. Well No. <u>1</u>
10. Elevation (Show whether DF, RKB, RT, GR, etc.) GL 3974'		9. Pool name or Wildcat Wildcat

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: Spudding and running 8-5/8" casing <input checked="" type="checkbox"/>		OTHER: <input type="checkbox"/>	

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

8-03-93 Spudded well with 12-1/4" bit using air and mist.  
8-04-93 TD surface at 455'. Ran 450' of 8-5/8" casing and cemented with 250 sx Class "C" 2% C.C. Circulated 100 sxs.  
8-05-93 Drilled out with 7-7/8" bit. Encountered water at 880' and drilled on to 2170'.  
8-07-93 Ran 7" 23# and 29# casing to 2170' and attempted to mud off casing.

Released drilling rig. Waiting on cable tool.

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

SIGNATURE Mitch Lee TITLE Agent DATE 8-08-93  
TYPE OR PRINT NAME Mitch Lee TELEPHONE NO. 622-3200

(This space for State Use)

ORIGINAL SIGNED BY  
MIKE WILLIAMS

APPROVED BY SUPERVISOR, DISTRICT II TITLE  DATE AUG 24 1993

CONDITIONS OF APPROVAL, IF ANY: