Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

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

CONDITIONS OF APPROVAL, IF ANY:

OIL CONSERVATION DIVISION
P.O. Box 2088 FRECTIVED
Santa Fe, New Mexico 87504-2088

WELL API NO.	
5. Indicate Type of Lease STATE	FEE X

P.O. Drawer DD, Artesia, NM 88210		G 2 V 1993	5. Indicate Type o	STATE	FEE 🙀
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	•	C. C. D.	6. State Oil & Gas Lease No.		
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 "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		7. Lease Name or Unit Agreement Name			
Type of Well: OIL GAS WELL X WELL OTHER P & A		ROSS FEE			
2. Name of Operator	Γ α_Α		8. Well No.	1	
McCLELLAN OIL CORPORATION 3. Address of Operator	20	×	9. Pool name or V	Vildcat	
P O Drawer 730, Roswell, NM 88202-073 4. Well Location Unit LetterD :660 Feet From TheNo		Line and660 !		n The <u>West</u>	Line
10. Elevation (GL 3	RKB, RT, GR, etc.)		Chaves	County
11. Check Appropriate Box to NOTICE OF INTENTION TO:	Indicate Nat	ture of Notice, R SUE	Report, or Other SSEQUENT F	REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANG	DON 🖾 R	EMEDIAL WORK		ALTERING CASING	3 🗌
TEMPORARILY ABANDON CHANGE PLANS	□ c	OMMENCE DRILLIN	DRILLING OPNS. 🔲 PLUG AND ABANDONMENT 🛛		
PULL OR ALTER CASING	c	CASING TEST AND CEMENT JOB			
OTHER:	🗆 🖯	OTHER:			
12 Describe Proposed or Completed Operations (Clearly state all pertimork) SEE RULE 1103. 8-7-93 Ran 7" 23# & 29# casing to 2178-16-93 TD well at 2410' with 6-1/8" Results 17-93 Shot 7" casing off at 1720' at 8-18-93 Plug well as follows (verbal in the state of th	70' and cendicated of the second contract of	mented with 2	5 sx cement		d
3. Set 2nd plug 45 sx 1590' to 4. Set 3rd plug 35 sx 1160' to 5. Set 4th plug 60 sx 620' to 5. Set 5th plug 60' to surface	to TD (tagg to 1769' (1 to 1260'. to 400'.		•	Post	TD-2 15-94 1-17
I hereby certify that the information above is take and complete to the best of n	ny knowledge and bel	id.			
SIGNATURE TIMES SEE	TTLE	Agent		DATE _8-19	
TYPEOR PRINT NAME Mitch Lee				TELEPHONE NO.	622-3200
(This space for State Use)				7-3	25-94