

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TR
(Other instructi
verse side)CATE
on reForm approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-069280-C

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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—" for such proposals.)

1.

OIL WELL ☐ GAS WELL ☒ OTHER WIW

DEC 8 1980

2. NAME OF OPERATOR

McClellan Oil Corporation ✓

O.C.D.

3. ADDRESS OF OPERATOR

Post Office Drawer 730, Roswell, N. M. 88201

ARTESIA OFFICE

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)
At surface

660' FN & EL

7. UNIT AGREEMENT NAME

Sulimar Queen Unit

8. FARM OR LEASE NAME

Sulimar Queen Ut. Tr. 3

9. WELL NO.

TRAIL - 1

10. FIELD AND POOL, OR WILDCAT

Sulimar Queen

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 24-T15S-R29E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3955' GR.

12. COUNTY OR PARISH

Chaves

13. STATE

N. M.

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐
☐
☐
☐

PULL OR ALTER CASING

☐
☐
☐
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☐
☐
☐

REPAIRING WELL

☐
☐
☐
☐

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other) Convert oil well to WIW XX

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

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.)*

9/28/79: Ran 2-3/8" lined tubing to 2015'. Packer set at 1984'.

Annulus between tubing and casing filled with anti-corrosive fluid. Pressure gauge installed on tubing-casing annulus to check for packer leak.

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

SIGNED

Lori Taylor

TITLE

Secretary

DATE

12/05/80

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

Post 10-3
Log to Injection
12-12-80