

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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, NM 88201

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

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

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) Conductor Pipe

SUBSEQUENT REPORT OF:

☐
☐
☐
☐
☐
☐
☐
☐

FEB 4 1985

O. C. D.
ARTESIA, OFFICE

LEASE
NM-23491

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
Flying H Ranch Unit

8. FARM OR LEASE NAME
Flying H Ranch Unit Tr. 3

9. WELL NO.
Tract 3-1

10. FIELD OR WILDCAT NAME
Wildcat - Abo

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 14-T15S-R19E

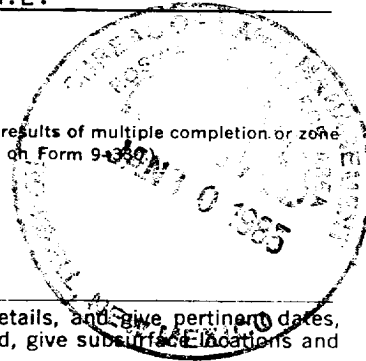
12. COUNTY OR PARISH
Chaves

13. STATE
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
5099' G.L.

(NOTE: Report results of multiple completion or zone change on Form 9-331-C)



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.)*

spudded

1/29/85: Drilled 40' of 18" hole. Ran 40' of 14" casing. Cemented with 3 yards of Ready Mix.

1/30/85: Move in Link air rig. Rig up. Will drill out with 12-1/4" bit
1/31/85:

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED *Paul Lagarde* TITLE Operations Manager DATE 1/30/85

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

ACCEPTED FOR RECORD
PETER W. CHESTER

JAN 30 1985

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

See Instructions on Reverse Side