Form 9-331 (May 1963)	DEPAF	UNI ' ') STATES RTMEN, JF THE INTE GEOLOGICAL SURVEY	(Other Instructions	Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO. LC 065510		
	this form for pr	OTICES AND REPORTS opposals to drill or to deepen or plu LICATION FOR PERMIT—" for such	g back to a different reservoir.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
1. OIL GA WELL W	S XX OTHE	R		7. UNIT AGREEMENT NAME		
2. NAME OF OPERAT	TOR	8. FARM OR LEASE NAME				
Jack L.	McClella	Federal "22"				
3. ADDRESS OF OPE	RATOR	9. WELL NO.				
Box 848	, Roswell	ר ר				
See also space 1 At surface		ny State requirements.*	10. FIELD AND POOL, OR WILDCAT TOdd San Andres 11. BEC., T., R., M., OR BLK. AND SUBVEY OR AREA			
				Sec. 22 T7S- R35E		
14. PERMIT NO.		15. ELEVATIONS (Show whether	DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE		
		4208.5 G.	L.	Roosevelt N.M.		
16.	Check	Appropriate Box To Indicate	Nature of Notice, Report, or	Other Data		
NOTICE OF INTENTION TO :			SUBSE	SUBSEQUENT REPORT OF:		
TEST WATER SI	EUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL		
FRACTURE TREA	т	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING		
SHOOT OR ACID	1 2 E	ABANDON*	SHOOTING OR ACIDIZING	ABANDON MENT [®]		
REPAIR WELL		CHANGE PLANS	(Other)			
(Other)	·	!	(NOTE : Report resul Completion or Recon	its of multiple completion on Well		

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.)

Propose to Plug and abandon well, placing 100' Cement plug above perforations from 4000 to 4100', Set 100' Cement plug 1/2 in and out of 4 1/2" casing cut off, 100' cement plug from 200 to 300', 1/2 in and out of 8 5/8" casing set at 253', set 20' cement plug at surface and install dry hole marker., clean location. Hole will be loaded with mud between cement plugs.

AMEDIMENT:

Set additional 100 foot cement plug at 1950-2050 feet. Use minimum of 15 sacks cement for bottom plug at 4100 feet.

8. I hereby certify that the is true and corr SIGNED Leno Milferd	rect	od. Supt.	DATE 2-7-70
(This space for Federal or State o			OVED
APPROVED BY CONDITIONS OF APPROVAL, IF ANY :	TITLE	APPK	DATE
		FEB	9 19/0
	***	n Reverse Side ARTHUF	R. BROWN
	See Instructions of	n Reverse Side ARTITION	CT ENGINEER