Form 9-331 (May 1968) 100 (May 1968)		STATES	SUBMIT IN TRIPLIC. (Other instructions	re- Duuget Duitau IV. 12 Italia.
700 - MATESIA		F THE INTERI	OR verse side)	5. LEASE DESIGNATION AND SERIAL NO. NM 071955
GEOLOGICAL SURVEY				6. IF INDIAN, ALLOTTEE OR TRIBE NAME
- SANTA FE S	SUMIDRY NOTICES A	ND REPORTS C	ON WELLS	
(Do not use	this form for proposals to drill Use "APPLICATION FOR	or to deepen or plug be PERMIT—" for such pr	ack to a different reservoir.	7
1.			(1 <u>1) 1 (3) (</u>)	7. UNIT AGREEMENT NAME
OIL XX WELL OTHER				
JACK L. MCCLELLAN				SMITH FEDERAL
8. ADDRESS OF OPERATOR				9, WELL NO.
	x 848, Roswell,	2 3 4 3 5 4		
4. LOCATION OF WE See also space 1	LL (Report location clearly and	10. FIELD AND POOL, OR WILDCAT		
At surface		CATO SAN ANDRES		
1980' FNL & 660' FWL				11. BEC., T., R., M., OR BLE. AND SURVEY OR AREA
1900 110	L & OOO TWL			13-T85-R30E
14. PERMIT NO.	15. ELEV.	ATIONS (Show whether DF,	12. COUNTY OR PARISH 13. STATE	
		4161.31 GL		CHAVES NEW MEXI
16.	Check Appropriate	Box To Indicate N	lature of Notice, Report,	or Other Data
	NOTICE OF INTENTION TO:	, box to indicate to		UBSEQUENT REPORT OF:
				BEPAIRING WELL
TEST WATER SI FRACTURE TREA	<u> </u>		WATER SHUT-OFF FRACTURE TREATMENT	ALTERING CARING
SHOOT OR ACID			SHOOTING OR ACIDIZIN	G XX ABANDONMENT®
REPAIR WELL	CHANGE PLA	INS	(Other)	accustor of multiple completion on Wall
(Other)			Completion or Re	results of multiple completion on Well ecompletion Report and Log form.)
proposed wor nent to this w	k. If well is directionally drine ork.) *	d, give subsurface locat	nons and measured and true	dates, including estimated date of starting any vertical depths for all markers and sones perti-
OCTOBER	11, 190(: REACH NEW A NEAT SERVI	CLASS "C" C	OO'D.F. RAN E. CEMENTED WI EMENT. BJ PERI	3611 of J-55, 8rd., ITH 200 sx of Incor- FORMED THE CEMENTING
OCTOBER	15, 1967: ACIDI		ом 3558 - 3572	The Transfer of the Park of th
				or chareton of the capable of the ca
			•	OCI 2-51962-
				SECULOSION SURVEY.
		•		Taylor 1900 (1900) at the control of
18. I hereby certify	that the foregoing is true and	correct	02524722	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
SIGNED	wid Mi Challa	TITLE	OPERATOR	DATE 10/.24/01
(This space for	Federal or State office use)			STATE THE STATE OF
APPROV ED D I)	TITLE		DATE
	OF APPROVAL, IF ANY:			the state of the s
				0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
		#C 1	D	ACCEPTED FOR RECORD
	`	"Dee Instructions	on Reverse Side	J. W. Sutherland
				Dit if a Engineer