

N. M. O. C. C. Co.
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPlicate*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1124.
5. LEASE DESIGNATION AND SERIAL NO.

NM 0558016

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 ☐ GAS ☐ OTHER T/A	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR McClellan Oil Corporation	8. FARM OR LEASE NAME Cedar Point
3. ADDRESS OF OPERATOR P. O. Box 848, Roswell, New Mexico 88201	9. WELL NO. 1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 990' FWL & 660' FNL	10. FIELD AND POOL, OR WILDCAT Wildcat
14. PERMIT NO.	11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA Sec. 21-T15S-R30E
15. ELEVATIONS (Show whether DF, RT, GS, etc.) 4047' GR	12. COUNTY OR PARISH 13. STATE Chaves N. M.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHUT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) Temporarily Abandonment ☒REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐(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.)

11/6/75: Utilizing 50 sacks mud and 295 barrels water, filled hole to surface with heavy mud. Capped well. Will temporarily abandon pending decision to deepen.

RECEIVED

NOV 7 1975

U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED

L. S. Taylor

TITLE

Office Manager

DATE

11/6/75

(This space for Federal or State office use)

APPROVED BY

John J. Frank

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: