

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

AUG 13 1969

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease
State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator JACK L. McCLELLAN	8. Farm or Lease Name DYE
3. Address of Operator Box 848, ROSWELL, NEW MEXICO 88201	9. Well No. 1
4. Location of Well UNIT LETTER P, 660 FEET FROM THE SOUTH LINE AND 660 FEET FROM EAST LINE, SECTION 28 TOWNSHIP 13-S RANGE 34-E NMPM.	10. Field and Pool, or Wildcat UNDESIGNATED
15. Elevation (Show whether DF, RT, GR, etc.) 4145' G. L. 4158' K. B.	12. County LEA

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> COMPLETION ATTEMPT

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

3/27/69: PERFORATED 4 SHOTS PER FOOT 10,436 - 10,439'; 10,443 - 10,445' AND 10,446 - 10,450'. ACIDIZED WITH 500 GALS. B. D. ACID. TESTED UNTIL 4/01/69. RECOVERED ACID WATER. SWABBED SULPHUR WATER. NO SHOWS OF OIL OR GAS. SHUT DOWN FOR ORDERS.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Jack L. McClellan TITLE OPERATOR DATE AUGUST 13, 1969

APPROVED BY John W. Remy TITLE COMMISSIONER DATE AUG 13 1969

CONDITIONS OF APPROVAL, IF ANY: