

PLUG & ABANDONMENT FORM

API NO. _____

OPERATOR

M^c ELVAEN O & G Prop., Inc.

LEASE NAME

N.M. AC State

WELL NO.

1

SEC.

#22

TWP.

17

RANGE

35

UNIT

H

Date plugging operations began - 8-2-95

Date plugging operations completed - 8-4-95

Name of plugging company - UNITED OIL SERV.

Comments: _____

Signed By:

Fanny W. Hill

Date:

8-4-95