Form 9-331

UNITED STATES

SUBMIT IN TRIPLIC TE

Form approved.

DEPA	ARTMEN. JF THE INTERIOR (Other instruction of the i	na e-	5. LEASE DESIGNATION NM-053558	
(Do not use this form for	NOTICES AND REPORTS ON WELLS proposals to drill or to deepen or plug back to a different reserve PLICATION FOR PERMIT—" for such proposals.)	oir.	6. IF INDIAN, ALLOTT	EE OR TRIBE NAME
OIL GAS WELL OTH	TER DRY HOLE		7. UNIT AGREEMENT I	NAME
2. NAME OF OPERATOR			8. FARM OR LEASE NA	3MA
McClellan Oil C	ORPORATION		TIP FEDER	AL
3. ADDRESS OF OPERATOR			9. WELL NO.	
P. O. Box 848,	Roswell, New Mexico 88201		1	
See also space 17 below.)			10. FIELD AND POOL, OR WILDCAT	
At surface			WILDCAT	
1980' FSL & 990' FEL			11. SEC., T., B., M., OR BLK. AND SURVEY OR AREA	
			SEC. 29-T	26S-R38E
4. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)		12. COUNTY OR PARIS	H 13. STATE
	2958.2' GR		LEA	NEW MEXIC
6. Chec	k Appropriate Box To Indicate Nature of Notice, Rej	oort, or C)ther Data	

NOTICE	S OF INTENTION TO:	SUBSEQUENT I	EPORT OF:
_			 1
TEST WATER SHUT-OFF	PULL OR ALTER CASING	 WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ABANDON*	 SHOOTING OR ACIDIZING	ABANDONMENT* XX
REPAIR WELL	CHANGE PLANS	 (Other)	
(Other)		(Note: Report results of my Completion or Recompletion	iltiple completion on Well 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.)*

APRIL 16: PURSUANT TO VERBAL APPROVAL THIS TEST WAS PLUGGED AND ABANDONED AS FOLLOWS: 10 SACK PLUG AT SURFACE, 100' PLUGS 270-370', 1100-1200', 2600-2700' AND 3600-3700', WITH HEAVY MUD PLACED BETWEEN PLUGS. HALLIBURTON PERFORMED THIS WORK.

YOU WILL BE NOTIFIED WHEN THE LOCATION IS READY FOR A FINAL INSPECTION.

8. I hereby certify that the foregoing is true and c	Correct LL TOTLE _	Operator	DATE MAY 1, 1974
(This space for Federal or State office use) APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE	APP	ROVED DATE 1974
	*See Instructi	ions on Reverse Side ART	HUR 2. BROWN HUR 2. BROWN ISTRICT PROCINCES