

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
NM Oil Conservation Commission
(Other Instruction 1)
Artesia, NM 88210

Budget Bureau No. 1004-4
Expires August 31, 1985
5. LEASE DESIGNATION AND SERIAL

NM-32312

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

West Fork Federal

9. WELL NO.

3

W. Pecos Slope-Abo

11. SEC., T., R., M., OR B.L. AND SURVEY OR AREA

Sec. 7, T5S, R22E

12. COUNTY OR PARISH 13. STATE

Chaves

N.M.

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different level. Use "APPLICATION FOR PERMIT" for such proposals.)

RECEIVED

JUL 18 '88

O. C. D.

ARTESIA, OFFICE

1. OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

McKay Oil Corporation

3. ADDRESS OF OPERATOR

P.O. Box 2014, Roswell, New Mexico 88202

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)

At surface

2180' FNL & 2180' FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

4276' GR

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

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*

REPAIR WELL

CHANGE PLANS

(Other)

(Other)

APD Extension

X

(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.)*

Operator requests a one(1) year extension of the Application for Permit to Drill on the above referenced location.

Exp Int
1-30-96
30-005-62482



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

SIGNED

Peter W. Chester

TITLE

Agent

DATE July 12, 1988

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED FOR - MONTH PERIOD
ENDING MAY 13 1989

*See Instructions on Reverse Side

APPROVED
PETER W. CHESTER

JUL 14 1988