

30-005-62078

1-12-84

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

O. C. D.
ARTESIA, OFFICE

Form C-101 30-005-62078
Revised 10-1-78

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LAND OFFICE	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>

5A. Indicate Type of Lease
STATE ☐ FEE ☒
5. State Oil & Gas Lease No.
N/A

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

Type of Work
Type of Well
DRILL ☒ DEEPEN ☐ PLUG BACK ☐
OIL WELL ☐ GAS WELL ☒ OTHER ☐ SINGLE ZONE ☐ MULTIPLE ZONE ☐

Name of Operator
STEVENS OPERATING CORPORATION

Address of Operator
P. O. BOX 2203, ROSWELL, NEW MEXICO 88201

Location of Well
UNIT LETTER P LOCATED 990 FEET FROM THE SOUTH LINE
660 FEET FROM THE EAST LINE OF SEC. 35 TWP. 6S R. 22E N. 10M

7. Unit Agreement Name

8. Farm or Lease Name
McKNIGHT

9. Well No.
4

10. Field and Pool, or Wildcat
WEST PECOS SLOPE *Also*

17. County
CHAVES

19. Proposed Depth 3500'	19A. Formation ABO	20. Rotary or C.T. ROTARY
Elevations (Show whether DP, RL, etc.) 4102.4'	21A. Find & State Plug. Bond STATE WIDE CURRENT	21B. Drilling Contractor DESERT DRILLING CO.
		22. Approx. Date Work will start November 28, 1983

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17 1/4	13 3/8	40.0#	600	1000	Circ.
12 1/2	8 5/8	24.0#	1528 8-250	1300	Circ.
7 7/8	4 1/2	11.7#	3500	350	500 Ft. Above Pay

Well will be drilled to total depth with rotary tools and electric logs run. Pay Zones will be perforated and stimulated as needed for production.

*Printed and
10-1-83 Bmd
11-25-83*

APPROVAL VALID FOR 180 DAYS
PERMIT EXPIRES 5-23-84
UNLESS RE-APPRAISING UNDERWAY

BOVE SPACE DESCRIBE PROPOSED PROGRAM; IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

rd Joe Thompson Title Production Controller Date November 21, 1983

(This space for State Use)

MOVED BY Barry Brooks TITLE Geologist DATE 11-23-83

CTIONS OF APPROVAL, IF ANY:

**NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT**

Form C-102
Supersedes C-128
Effective 1-1-65

All distances must be from the outer boundaries of the Section

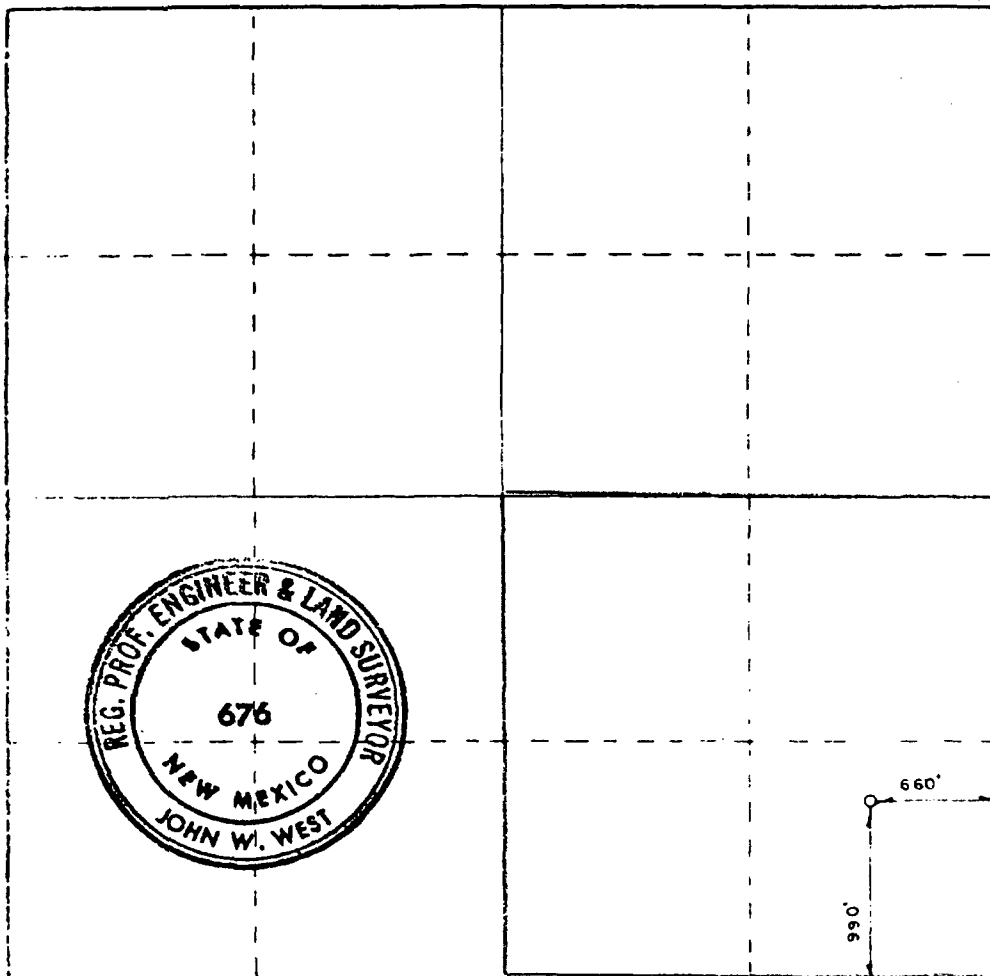
Operator STEVENS OPERATING CO.			Lease McKNIGHT		Well No. 4
Section P	Section 35	Township 6 SOUTH	Range 22 EAST	County CHAVES	
Well Location of Well: 990 feet from the SOUTH line and 660 feet from the EAST line					
Well Level Elev. 4102.4	Producing Formation ABO		Pool WEST PECOS SLOPE		Dedicated Acreage: 160 Acres

- 1 Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
- 2 If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- 3 If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☒ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

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

Name
Patricia R. Thompson
Position
Production Controller
Company
Stevens Operating Corporation
Date
November 21, 1983

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed
NOVEMBER 15, 1983
Registered Professional Engineer and/or Land Surveyor

John W. West
Certificate No. **JOHN W. WEST, 676**
RONALD J. EIDSON, 3239

130 640 90 1320 1650 1980 2310 2640 2970 3300 3630 3960 4290 4620 4950 5280 5610 5940 6270 6600

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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RECEIVED BY
OIL CONSERVATION DIVISION
P. O. BOX 2034
SANTA FE, NEW MEXICO 87501
DEC 19 1983
O. C. D.
ARTESIA, OFFICE

Form C-103
Revised 10-1-78

SUNDARY 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.

OIL
WELL ☐

GAS
WELL ☒

OTHER-

Name of Operator

Stevens Operating Corporation

Address of Operator

P. O. Box 2203, Roswell, New Mexico 88201

Location of Well

UNIT LETTER P 990 FEET FROM THE South LINE AND 660 FEET FROM

THE East LINE, SECTION 35 TOWNSHIP 6S RANGE 22E NMPM.

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

4102.4 GR

3a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.
7. Unit Agreement Name
8. Farm or Lease Name McKnight
9. Well No. 4
10. Field and Pool, or Whdeat West Pecos Slope Abo
12. County Chaves

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

OTHER Change casing program

REMEDIAL WORK ☐
COMMENCE DRILLING OPER. ☐
CASING TEST AND CEMENT JOBS ☐

OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

16. 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.

Propose to change the casing program as follows:

17 1/4" hole--Set 60' of 14" conductor pipe

12 1/4" hole--Set 1528' of 8 5/8" 24.0# w/1300 sxs circulated to surface

7 7/8" hole--Set 3500' of 4 1/2" 11.7# w/350 sxs w/est. top at 500' above pay.

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

SIGNED For Shonyer

TITLE Production Controller

DATE 12/16/83

APPROVED BY Original Signed By
Leslie A. Clements

TITLE _____

DATE FEB 16 1984

CONDITIONS OF APPROVAL, IF ANY: Supervisor District II

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

RECEIVED BY

JAN 17 1984

O. C. D.

WELLS DIVISION

5. Indicate Type of Lease	State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.		
7. Unit Agreement Name		
8. Farm or Lease Name	McKnight	
9. Well No.	4	
10. Field and Pool, or Wildcat	Pecos Slope Abo	
11. County	Chaves	

SUNDY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO OCEPLN OR PLUG BACK TO DIFFERENT LEASES. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL ☐ GAS WELL ☒ OTHER ☐

Name of Operator
STEVENS OPERATING CORPORATION ✓
Address of Operator
P. O. Box 2408, Roswell, New Mexico
Location of Well

UNIT LETTER P 990 FEET FROM THE South LINE AND 660 FEET FROM
THE East LINE, SECTION 35 TOWNSHIP 6S RANGE 22E NMPM.

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

4102.4 GR

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐
PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER Spud & Set Surface Casing ☒
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.

12-27-83 Spud & set 60' of 14" conductor pipe and ready mixed in.
Ran 31 joints 8 5/8" csg., set & cement @ 1296' w/700 sxs Howco Lite & 200 sxs Class "C"
w/2% cc. Plug down @ 8:00 a.m. 12-31-83. Did not circulate.

Ran temp. surv. (top cement @ 675') 1" 24 hrs., used 700 sxs Class "C" cement w/3% cc to
circulate cement to surface. WOC 18 hrs. Pressure up 1000# for 30 minutes logging no
pressure decrease. 1-1-84.

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

SIGNED Bar Thompson

TITLE Production Controller

DATE Jan. 10, 1984

Original Signed By
Leslie A. Clements
Supervisor District II

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE **FEB 16 1984**

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

RECEIVED BY

JAN 17 1984

O.C.D.
ARTESIA OFFICE

Form C-105
Revised 10-1-78

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LAND OFFICE	
OPERATOR	

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1. TYPE OF WELL Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> DRY <input type="checkbox"/> OTHER <input type="checkbox"/> <u>Plugged & Abandon</u>		5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>	
2. TYPE OF COMPLETION NEW WELL <input checked="" type="checkbox"/> WORK OVER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> DIFF. RESVR. <input type="checkbox"/> OTHER <input type="checkbox"/>		5. State Oil & Gas Lease No.	
3. Name of Operator STEVENS OPERATING CORPORATION		7. Unit Agreement Name	
4. Address of Operator P. O. Box 2408, Roswell, New Mexico		8. Farm or Lease Name McKnight	
5. Location of Well		9. Well No. 4	
6. SURVEY LETTER <u>P</u> LOCATED <u>990</u> FEET FROM THE <u>South</u> LINE AND <u>660</u> FEET FROM <u>East</u> LINE OF SEC. <u>35</u> TWP. <u>6S</u> RGE. <u>22E</u> NMPM		10. Field and Pool, or Wildcat Pecos Slope Abo	
11. Date Spudded 12-27-83		12. County Chaves	
16. Date T.D. Reached 1-3-84		13. Elevations (DF, RKB, RT, GR, etc.) 4102.4 GR	
17. Date Compl. (Ready to Prod.) 1-4-84		19. Elev. Casinghead	
18. Total Depth 3161'		20. Plug Back T.D.	
21. If Multiple Compl., How Many		22. Intervals Drilled By Rotary Tools 0-3500	
23. Producing Interval(s), of this completion - Top, Bottom, Name		24. Was Directional Survey Made	
25. Type Electric and Other Logs Run CNL		26. Was Well Cored	
27. CASING RECORD (Report all strings set in well)			
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE
8 5/8"	24#	1296'	12 1/2"
CEMENTING RECORD		AMOUNT PULLED	
700 sxs Howco Lite			
28. LINER RECORD			
SIZE	TOP	BOTTOM	SACKS CEMENT
29. TUBING RECORD			
SIZE	DEPTH SET	PACKER SET	
30. Perforation Record (Interval, size and number)			
31. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.			
DEPTH INTERVAL		AMOUNT AND KIND MATERIAL USED	
32. PRODUCTION			
Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)	
Well Status (Prod. or Shut-in)			
Date of Test	Hours Tested	Choke Size	Prod'n. For Test Period
Oil - Bbl.	Gas - MCF	Water - Bbl.	Gas - Oil Ratio
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.
Gas - MCF	Water - Bbl.	Oil Gravity - API (Corr.)	
33. Disposition of Gas (Sold, used for fuel, vented, etc.)			Test Witnessed By
34. List of Attachments CNL			
I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.			
SIGNED <u>Earl Thompson</u>		TITLE <u>Production Controller</u> DATE <u>Jan 11, 1984</u>	

INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, items 30 through 34 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico

Northwestern New Mexico

T. Anhy _____	T. Canyon _____	T. Ojo Alamo _____	T. Penn. "B" _____
T. Salt _____	T. Strawn _____	T. Kirtland-Fruitland _____	T. Penn. "C" _____
T. Salt _____	T. Atoka _____	T. Pictured Cliffs _____	T. Penn. "D" _____
T. Yates _____	T. Miss _____	T. Cliff House _____	T. Leadville _____
T. 7 Rivers _____	T. Devonian _____	T. Menefee _____	T. Madison _____
T. Queen _____	T. Silurian _____	T. Point Lookout _____	T. Elbert _____
T. Grayburg _____	T. Montoya _____	T. Mancos _____	T. McCracken _____
T. San Andres _____	T. Simpson _____	T. Gallup _____	T. Ignacio Qtzte _____
T. Glorieta _____	T. McKee _____	Base Greenhorn _____	T. Granite _____
T. Paddock _____	T. Ellenburger _____	T. Dakota _____	T. _____
T. Blinberry _____	T. Gr. Wash _____	T. Morrison _____	T. _____
T. Tubb 2145'	T. Granite _____	T. Todillo _____	T. _____
T. Drinkard _____	T. Delaware Sand _____	T. Entrada _____	T. _____
T. Abo 2650'	T. Bone Springs _____	T. Wingate _____	T. _____
T. Wolfcamp _____	T. _____	T. Chinle _____	T. _____
T. Penn. _____	T. _____	T. Permian _____	T. _____
T. Cisco (Bough C) _____	T. _____	T. Penn. "A" _____	T. _____

OIL OR GAS SANDS OR ZONES

No. 1, from 2650' to T.D.	No. 4, from _____ to _____
No. 2, from _____ to _____	No. 5, from _____ to _____
No. 3, from _____ to _____	No. 6, from _____ to _____

IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from _____ to _____ feet	_____
No. 2, from _____ to _____ feet	_____
No. 3, from _____ to _____ feet	_____
No. 4, from _____ to _____ feet	_____

FORMATION RECORD (Attach additional sheets if necessary)

From	To	Thickness in Feet	Formation	From	To	Thickness in Feet	Formation
0	2145'	2145'	Red Beds, dolomite, limestone and sand.				
2145'	2650'		Anhydrite, dolomite, limestone and Sand				
2650'	3161'		Red Sh. and Red Sd.				

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OPERATOR	<input checked="" type="checkbox"/>

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-79

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	
7. Unit Agreement Name	
8. Farm or Lease Name McKnight	
9. Well No. 4	
10. Field and Pool, or Wildcat Pecos Slope Abo	
12. County Chaves	

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.)

OIL WELL ☐ GAS WELL ☒ OTHER-
Name of Operator
STEVENS OPERATING CORPORATION
Address of Operator
P. O. Box 2408, Roswell, New Mexico
Location of Well
UNIT LETTER P 990 FEET FROM THE South LINE AND 660 FEET FROM
THE East LINE, SECTION 35 TOWNSHIP 6S RANGE 22E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)
4102.4 GR

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	

18. 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.

Plug & abandon hole, set 1st plug @ 2700 to 2600, used 35 sxs cement. 2nd plug @ 2110 to 2010, used 35 sxs cement. 3rd plug @ 1346 to 1246, used 45 sxs cement. Plug @ surface. Rig released @ 4:00 p.m. 1-4-84.

TD 3141

Post # B-2
1-27-84
f + A

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

SIGNED Gar Thompson TITLE Production Controller DATE Jan. 10, 1984

APPROVED BY Dan Brooks TITLE Geologist DATE 1-26-85

CONDITIONS OF APPROVAL, IF ANY:

District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand, Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy Minerals and Natural Resources

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-101
Revised March 17, 1999

RECEIVED

FEB 19 2004

OCD-ARTESIA

Submit to appropriate District Office
State Lease - 6 Copies
Fee Lease - 5 Copies

☐ AMENDED REPORT

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

¹ Operator Name and Address MCKAY OIL CORPORATION P.O. BOX 2014 ROSWELL, NM 88202-2014		² OGRID Number
		³ API Number 30-005-62078
³ Property Code	⁵ Property Name MCKNIGHT #4	⁶ Well No. #4

⁷ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
P	35	6S	22E		990	SOUTH	660	EAST	CHAVES

⁸ Proposed Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
⁹ Proposed Pool 1 Peccas Slope; Abo						¹⁰ Proposed Pool 2			

¹¹ Work Type Code	¹² Well Type Code	¹³ Cable/Rotary ROTARY	¹⁴ Lease Type Code FEE	¹⁵ Ground Level Elevation 4102
¹⁶ Multiple	¹⁷ Proposed Depth 3161	¹⁸ Formation ABO	¹⁹ Contractor UNITED	²⁰ Spud Date ORIGINAL 12/27/83

²¹ Proposed Casing and Cement Program

Hole Size	Casing Size	Casing weight/foot	Setting Depth	Sacks of Cement	Estimated TOC
12 1/4	8 5/8	24#	1296'	900 sks	SURFACE
	5 1/2	15.5#	2900'	200 sks	1700'

22 Describe the proposed program. If this application is to DEEPEN or PLUG BACK, give the data on the present productive zone and proposed new productive zone. Describe the blowout prevention program, if any. Use additional sheets if necessary.

WELL WAS PLUGGED AND ABANDONED 1/4/84. MCKAY OIL CORPORATION PLANS TO RE-ENTER SAID WELL TO 2900' AND DRILL OUT CEMENT PLUGS TO 2900'. RUN 5 1.2" IN CASING TO 2900'.

²³ I hereby certify that the information given above is true and complete to the best of my knowledge and belief.		OIL CONSERVATION DIVISION	
Signature: <i>April D. McKay</i>		Approved by: <i>Jim A. Beam</i>	
Printed name: APRIL D. MCKAY		Title: <i>Feb</i> SUPERVISOR, DISTRICT II	
Title: VICE PRESIDENT		Approval Date: <i>JAN 20 2004</i> Expiration Date: <i>JAN 20 2005</i>	
Date: 2/12/04	Phone: 505-623-4735	Conditions of Approval: Attached <input type="checkbox"/>	

**NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT**

Form C-102
Supersedes C-128
Effective 1-1-65

All distances must be from the outer boundaries of the Section

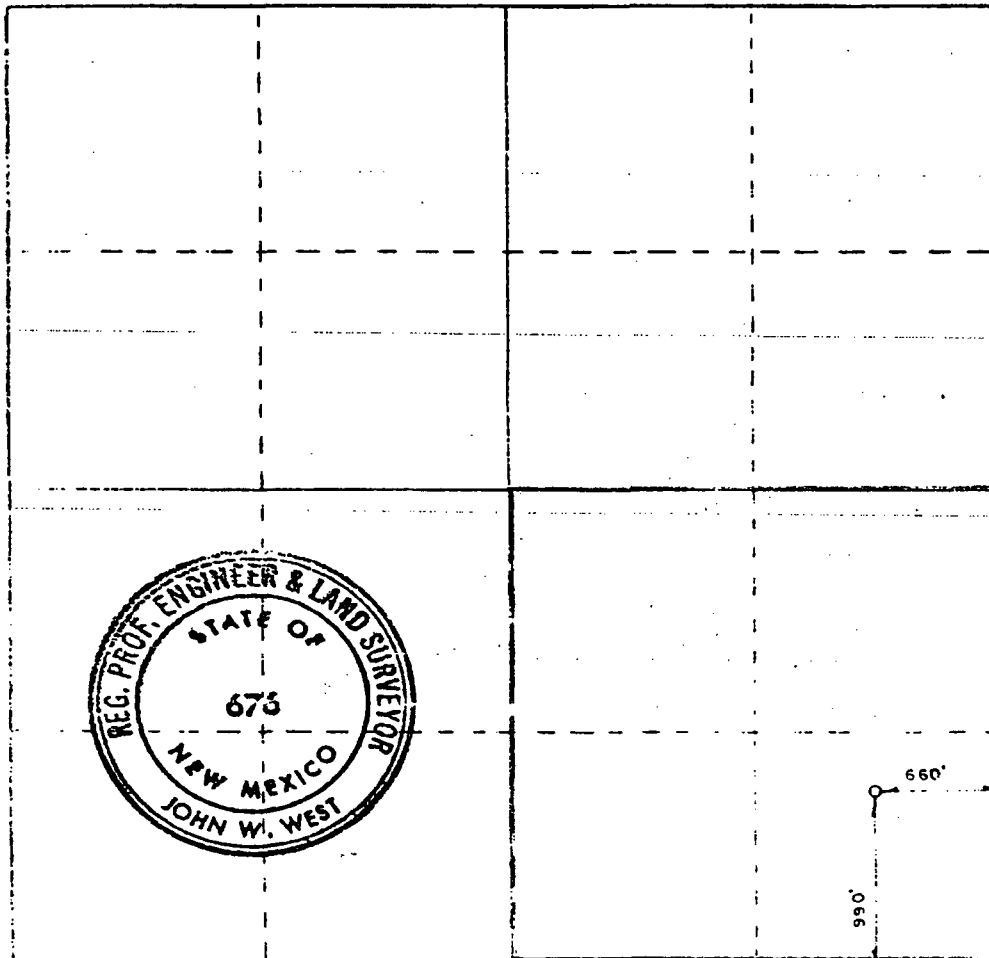
STEVEN'S OPERATING CO.			McKNIGHT		Well No. 4
P	Section 35	Township 6 SOUTH	Range 22 EAST	County CHAVES	
Location of Well:					
990	feet from the SOUTH	line and	660	feet from the EAST	line
Level Elev. 4102.4	Producing Formation ABO	Pool WEST PECOS SLOPE	Estimated Acreage: 160 Acres		

- 1 Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
- 2 If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- 3 If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

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

Signature: *Patricia R. Thompson*
 Name: **Patricia R. Thompson**
 Position: **Production Controller**
 Company: **Stevens Operating Corporation**
 Date: **November 21, 1983**

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

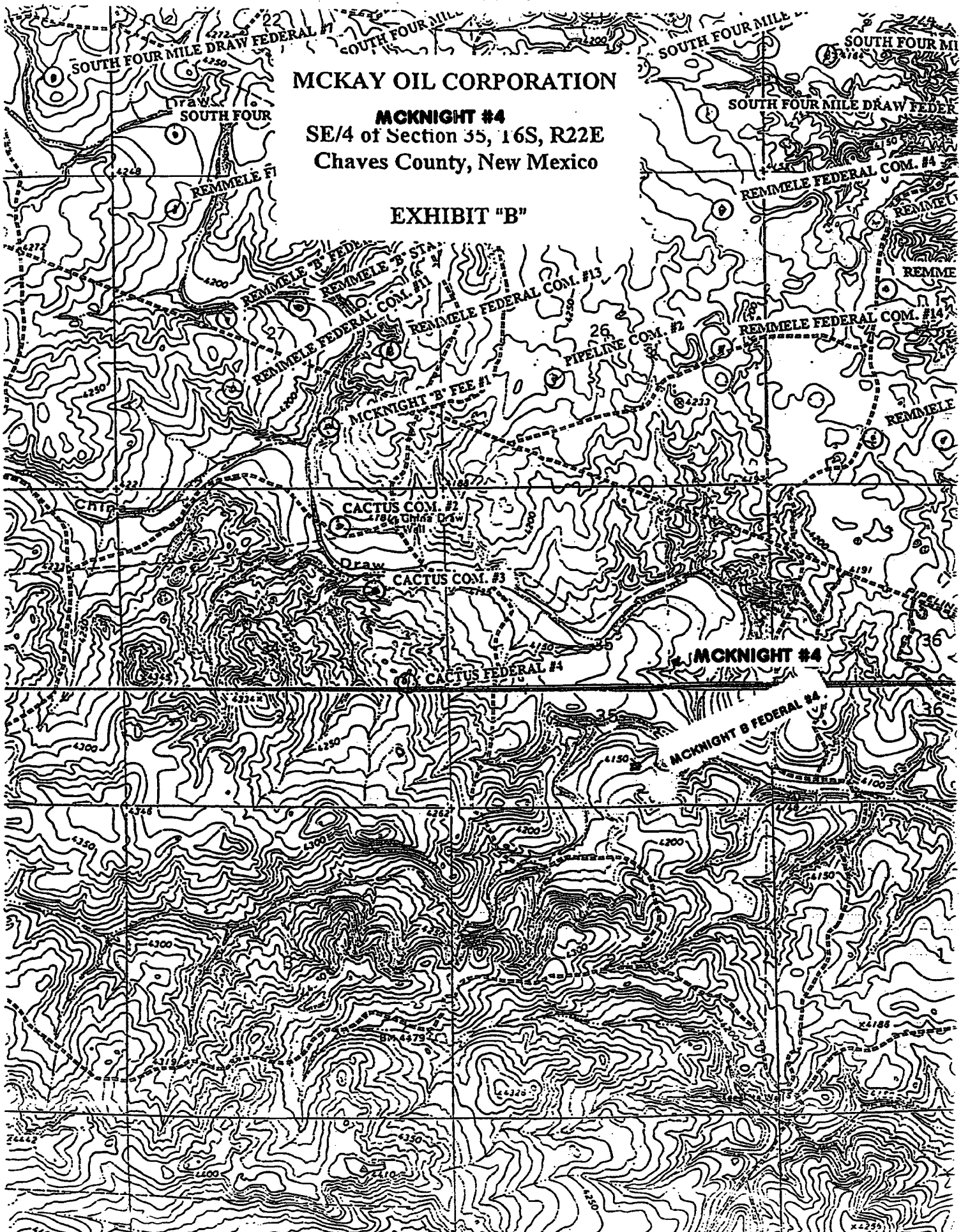
Date Surveyed: **NOVEMBER 15, 1983**
 Registered Professional Engineer and Land Surveyor

Signature: *John W. West*
RECEIVED NOV 22 1983
 RONALD J. EIDSON, 3239

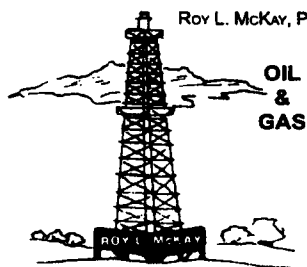
MCKAY OIL CORPORATION

MCKNIGHT #4
SE/4 of Section 35, 16S, R22E
Chaves County, New Mexico

EXHIBIT "B"



McKay Oil Corporation



ROY L. MCKAY, PRESIDENT

MAILING ADDRESS: P.O. Box 2014 ROSWELL, N.M. 88202 • TELEPHONE 505 / 623 - 4735

STREET ADDRESS: ONE MCKAY PLACE ROSWELL, N.M. 88201 • FAX No. 505 / 624 - 2202

February 12, 2004

Oil Conservation Division

Bryan Arrant

1301 W. Grand Avenue

Artesia, NM 88211

Re: H2S Contingency Plan-McKnight #4

Bryan,

Please see attached Contingency Plan-H2S for the McKnight #4 located in Sec 35, T6S, R22E 660' FSL & 2310' FEL in Chaves County. Should you need any further information, please contact me at 505-623-4735.

Sincerely,

A handwritten signature in black ink, appearing to read "April McKay", is written over a horizontal line.

April McKay
Vice President

**MCKAY OIL CORPORATION
P.O. BOX 2014
ROSWELL, NM 88202-2014
505-623-4735**

**HYDROGEN SULFIDE (H₂S) CONTINGENCY PLAN FOR THE
MCKNIGHT #4
LOCATED IN SEC 35, T6S, R22E IN
CHAVES COUNTY, NEW MEXICO**

**NO HYDROGEN SULFIDE OR OTHER HAZARDOUS GASES OR FLUIDS
HAVE BEEN ENCOUNTERED, REPORTED OR KNOWN TO EXIST AT THIS
DEPTH IN THIS AREA.**

MCKNIGHT #4

This is an open drilling site. H2S monitoring equipment and emergency response equipment will be used within 500' of zones known to contain H2S, including warning signs, wind indicators and H2S monitor. Pumpers carry (MICROPACKS) H2S pocket testers at all times. Pulling units has an H2S indicator that puts off light and alarm of any indication of H2S being present.

MAPS-SEE ATTACHED

MCKAY OIL CORPORATION
MCKNIGHT #4
 SE/4 of Section 35, 16S, R22E
 Chaves County, New Mexico

EXHIBIT "B"

REMMIELE FEDERAL COM. #11
 REMMELE FEDERAL COM. #13
 REMMELE FEDERAL COM. #15
 REMMELE FEDERAL COM. #17
 CACTUS COM. #2
 CACTUS COM. #3
 MCKNIGHT B FEDERAL #4
 PIPELINE COM. #1
 PIPELINE COM. #2

EMERGENCY PROCEDURES

In the case of a release of gas containing H₂S, the first responder must isolate the area and prevent entry by other persons into the 100 ppm ROE. Additionally the first responder must evacuate any public spaces encompassed by the 100 ppm ROE. First responder must take care not to injure themselves during the operation. Company and or local officials must be contacted to aid in this operation. Evacuation of the public should be beyond the 100 ppm ROE.

All responders must have training in the detection of H₂S measures for protection against the gas, equipment used for protection and emergency response. Additionally, responders must be equipped with H₂S monitors and air packs on order to control the release. Use the "buddy system" to ensure no injuries occur during the response.

IGNITION OF GAS SOURCE

Should control of the well be considered lost and ignition considered, take care to protect against exposure of sulfur Dioxide (SO₂). Intentional ignition must be coordinated with the NMOCD and local officials. Additionally the NM State Police may become involved. NM State Police shall be the Incident Command on scene of any major release. Take care to protect downwind whenever there is an ignition of the gas.

CHARACTERISTICS OF H₂S & SO₂

COMMON NAME	CHEMICAL FORMULA	SPECIFIC GRAVITY	THRESHOLD LIMIT	HAZARDOUS LIMIT	LETHAL CONCENTRATION
HYDROGEN SULFIDE	H ₂ S	1.189 AIR =1	10 PPM ⁴	100 PPM/HR	600 PPM
SULFUR DIOXIDE	SO ₂	2.21 AIR =1	2 PPM	N/A	1000 PPM

CONTACTING AUTHORITIES

McKay Oil Corporation personnel must liaison with local and state agencies to ensure a proper response to a major release. Additionally, the OCD must be notified of the release as soon as possible but no later than 4 hours. Agencies will ask for information such as type and volume of release, wind direction, location of release, etc. be prepared with all information available. The following call list of essential and potential responders must be in coordination with the State of New Mexico's Hazardous Materials Emergency Response Plan (HMER).

MCKAY OIL CORPORATION CALL LIST

CHAVES COUNTY (505)	OFFICE	CELL PHONE	HOME PHONE
HUMBERTO PEREZ	625-1154	626-8580	627-1985
JIM ROBINSON	625-1154	626-8579	624-1093
APRIL MCKAY	623-4735	626-8575	625-2848

CHAVES COUNTY (505) ROSWELL

STATE POLICE	622-7200
CITY POLICE	911 or 624-6770
SHERIFF'S OFFICE	624-6500
AMBULANCE	911
FIRE DEPARTMENT	624-6800
LEPC (Local Emergency Planning Committee)	Teresa Barncastle 624-6770 ext 129
NMOCD	748-1283
ENMMC (Hospital)	622-8170