Form 3160-5 (November 1994)

UNITED STATES 301 W. GROND AVGING DEPARTMENT OF THE INTERIOR 10 HONE 80210

FORM APPROVED OMB No. 1004-0135 Expires July 31, 1996

. BU.	REAU OF LAND MAN	AGEMENT									
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.				5. Lease Serial No.NM 361936. If Indian. Allottee or Tribe Name							
						SUBMIT IN TRIPLICATE – Other instructions on reverse side				7. If Unit or CA/Agreement. Name and/or No	
						1. Type of Well Oil Well Gas Well Other 2. Name Of Operator MCKAY OIL CORPORATION				8. Well Name and No.	
Oil Well Gas Well Other				FOUR MILE DRAW B FEDERAL #7H							
2. Name Of Operator MCKAY OIL CORRORATION				9. API Well No.							
MCKAY OIL CORPORATION				30-005-63865							
3a. Address 3b. Phone i			rod code)	10. Field and Pool, or Exploratory Area							
P.O. BOX 2014 ROSV	505-623-4735		W PECOS ABO SLOPE-82740								
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				11. County or Parish, State							
LOT M, Sec 15, T6S, R22E				CHAVES COUNTY, NM							
660' FSL & 660' FWL											
12. CHECK APP	PROPRIATE BOX(ES)	ΓΟ INDICATE NATUI	RE OF NOTICI	E, REPORT, OR	OTHER DATA						
TYPE OF SUBMISSION TYPE OF ACTION			YPE OF ACTION	N							
☐ Notice of Intent	☐ Acidize	☐ Deepen	☐ Production	on (Start/Resume)							
	☐ Alter Casing	☐ Fracture Treat	☐ Reclama								
Subsequent Report	☐ Casing Repair	☐ New Construction	☐ Recompl	ete	Other						
☐ Final Abandonment Notice	☐ Change Plans	☐ Plug and Abandon	☐ Tempora	arity Abandon <u>Spud</u> risposal							
	☐ Convert to Injection	Plug Back	☐ Water D								
and zones. Attach the Bond un within 30 days following compl	pen directionally or recomple der which the work will be p etion of the involved operatio en completed. Final Abandon	te horizontally, give subsurfar erformed or provide the Bon ns. If the operation results in ment Notices shall be filed or	ce locations and med No. on file with a multiple complete.	easured and true verti BLM/BIA. Required etion or recompletion	d work and approximate duration cal depths of all pertinent markers d subsequent reports shall be filed in a new interval, a Form 3160-4 unation, have been completed, and						
MCKAY OIL CORPO	RATION Spud well (@ 6:00pm on 2/5/07	7.								
				ACCEPTE	ED FOR RECORD						
					RY GOURLEY						
Lt Thereby certify that the forces	ing is true and somest			L FEIRU	-Frank Electrical						
14. I hereby certify that the foregoing is true and correct Name (<i>Printed/Typed</i>)			e								
Carol Shanks			Production Analyst								
Signature Wall Sharks			Date 2/6/2007								
	THIS SPACE	FOR FEDERAL OR S		E USE							
Approved By			Title Date								
Conditions of approval, if any, ar or certify that the applicant holds leg which would entitle the applicant to	al or equitable title to those rig	Office		1							
Title 19 II C C Castion 1001	is a saint of formatter in	-11 - 1 -200 10 - 1 - 1		0.1 77 1	10						