

Form 1000-5  
(November 1983)  
(Formerly 9-331)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

NM Oil Cons. Commissio  
Submit in triplicate  
Other instructions on re-  
verse side  
Artesia, NM 88210

Subject Bureau No. 1000-0135  
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.  
NM-32323-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Five Mile Tank Federal

9. WELL NO.  
2-Z

10. FIELD AND POOL, OR WILDCAT  
West Pecos Slope Abo

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA  
Section 9-6S-23E

12. COUNTY OR PARISH  
Chaves

13. STATE  
N.M.

1. OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR  
McKAY OIL CORPORATION

3. ADDRESS OF OPERATOR  
P. O. Box 2014, Roswell, NM 88201

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

1880' FSL & 1980' FEL

14. PERMIT NO.  
15. ELEVATIONS (Show whether DF, RT, CR, etc.)  
4198' GL

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) change in Operator

REPAIRING WELL

ALTERING CASING

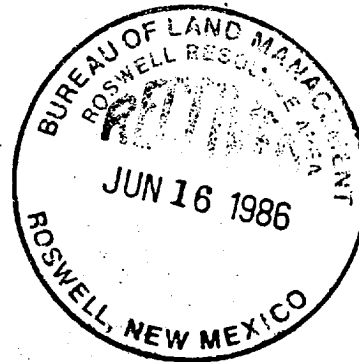
ABANDONMENT\*

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.)\*

Effective 4-1-86, McKay Oil Corporation took over operations.



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

SIGNED Shari Hamill

TITLE Clerk

DATE 6-13-86

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

APPROVED  
PETER W. CHESTER

JUL 11 1986

BUREAU OF LAND MANAGEMENT  
ROSWELL RESOURCE AREA

\*See Instructions on Reverse Side