

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPlicate
NM (One copy to
verse side)
Drawer DD

Form approved
Budget Bureau No. 1004-0185
Expires August 31, 1985

LEASE DESIGNATION AND SERIAL NO

NM-26679

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

McKay-Sundance Fed.

9. WELL NO.

#1

10. FIELD AND POOL, OR WILDCAT

Wildcat

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 24, T.11S, R.26E

12. COUNTY OR PARISH 13. STATE

Chaves N.M.

1. OIL ☒ GAS ☐ OTHER ☐
WELL WELL

2. NAME OF OPERATOR

McKay Oil Corporation

3. ADDRESS OF OPERATOR

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

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

At surface

1980' FSL & 1980' FWL

14. PERMIT NO.

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

3623'

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐
☐
☐
☐

PULL OR ALTER CASING

☐
☐
☐
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☐
☐

REPAIRING WELL

☐
☐
☐

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

Set Production csg

☒

(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.) *

5-10-84 TD 6325' (7-7/8" hole). Ran 115 jts (6353') 4 1/2" K-55
10.5# csg. Set @ 6324' w/275 sx Class "C" cmt w/2%
CaCl. Displaced w/2% KCL wtr. Job complete @ 1:00 AM
on 5-11-84. WOCU & WOC to cut off 4 1/2" csg.



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

SIGNED

Lawrence L. Schmitt

TITLE

Production Analyst

DATE

5-16-84

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY

PETER W. HESTER

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY

MAY 18 1984

*See Instructions on Reverse Side