

UNITED STATES DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
NM Oil Cons. Commission.  
Artesia, NM 88210

Form approved.  
Budget Base of N. 1004-1  
Expires August 31, 1985

LEASE DESIGNATION AND SERIAL

NM-36193

IF INDIAN, ALLOTTEE OR TRIBE NAME

UNIT AGREEMENT NAME

FARM OR LEASE NAME

Four Mile Draw Fed.

WELL NO.

#3

FIELD AND POOL OR WILDCAT

W. Pecos Slope Abo

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

Sec. 14-6S-22E

COUNTY OR PARISH STATE

Chaves

NM

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" for such proposals.)

OIL WELL ☐ GAS WELL ☐ OTHER ☐

NAME OF OPERATOR

McKay Oil Corporation

ADDRESS OF OPERATOR

Post Office Box 2014, Roswell, NM 88201

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

660' FSL & 660' FWL

PERMIT NO.

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

4248' GL

JAN 12 '89

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) NTL-2B

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT\*

(Other)

(NOTE: Report results of multiple completion on Well  
Completion or Recompletion Report and Log form.)

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.)\*

Salt water to be contained in a fiberglass tank or barrel. Disposal by method of evaporation or trucked to a disposal site.

I hereby certify that the foregoing is true and correct

SIGNED

TITLE Operations Supervisor

DATE 12-8-88

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED  
DATE PETER W. CHESTER

JAN 6 1989

BUREAU OF LAND MANAGEMENT  
ROSWELL RESOURCE AREA

\*See Instructions on Reverse Side