

Drawer DD
Form 1001-1001
(November 1985)
(Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPlicate
(Other instructions on re-
verse side)

Expires August 31, 1985

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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		RECEIVED BY MAY 21 1986 O. C. D. 88201 OFFICE	5. LEASE DESIGNATION AND SERIAL NO. NM 36195	
2. NAME OF OPERATOR McKay Oil Corporation			6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR Post Office Box 2014, Roswell, New Mexico			7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FNL & 1980' FWL			8. FARM OR LEASE NAME Remmele Federal	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, ST, GR, etc.) 4174' GR		9. WELL NO. 6
				10. FIELD AND POOL, OR WILDCAT W. Pecos Slope Abo
				11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 25-6S-22E
				12. COUNTY OR PARISH Chaves
				13. STATE NM

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) resumed drilling, surface & prod. csg. (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	(Other) <input checked="" type="checkbox"/>

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.)

5-9-86 Started drilling 12 1/4" hole. TD hole @ 7:10 a.m.

5-10-86 RIH w/21 jts. of 8 5/8" 24# J-55 API csg. Set @ 884', pumped 150 bbls. LCM pill. Cemented w/150 sxs of pacesetter lite "C" w/4% CaCl₂ and 150 sxs of class "C" w/3% CaCl₂. Plug down @ 10:30 a.m. RIH w/1" Kobe pipe. Tagged cement @ 490'. Brought cement to surface in 6 stages using 200 sxs of class "C" w/5% CaCl₂, 400 gals of Aqua fix, and 6 yds. of pea gravel.

5-13-86 Ran 81 jts of 4 1/2" 9.5# J-55 API csg., set @ 3292'. Cemented w/300 sxs of 50/50 POZ Class "C". Plug down @ 2:30 a.m. Ran 43 jts of 1" Kobe pipe, cement w/300 sxs pacesetter lite "C", circ. 15 sxs. Completed job @ 6:15 a.m.

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

SIGNED Theresa Rodriguez TITLE Production Analyst DATE 5-13-86
(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY: _____

ACCEPTED FOR RECORD
PETER W. CHESTER

MAY 20 1986

BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

*See Instructions on Reverse Side