

(November 1983)  
(Formerly 9-331)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN THE  
NM Oil and Gas Construction Commission  
verse side  
Drawer DD

Expires August 31, 1985

LEASE DESIGNATION AND SERIAL NO.

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 <input type="checkbox"/>	<div>RECEIVED BY OCT 14 1986</div>	5. LEASE DESIGNATION AND SERIAL NO. NM-36194
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 88261 D.		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 1413' FWL and 1166' FNL		8. FARM OR LEASE NAME S. Four Mile Draw Fed.
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4118' GL	9. WELL NO. #3
		10. FIELD AND POOL OR WILDCAT W. Pecos Slope Abo
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 24-6S-22E
		12. COUNTY OR PARISH Chaves
		13. STATE NM

16. 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 COMPLETE <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) Spud & surface csg. <input checked="" type="checkbox"/>	
(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.) \*

9-26-86 Drilled 30' of 12 1/4" starter, rathole, mousehole.

9-28-86 Ran in hole w/22 jts. 8 5/8" 32#, J-55 API csg. Set @ 897'. cemented w/500 swx. Class "C" cement, w/3% CaCl<sub>2</sub>. Plug down @ 5:30 a.m. Circ. 20 sxs. cement.

Nipple up, pressure tested BOP & 8 5/8" csg. to 1000 psi for 30 min. held ok. TIH w/bit #4. Drill through cement plug in 1/2 hr.

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

SIGNED Theresa Rodriguez TITLE Production Analyst DATE 9-30-86

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD  
PETER W. CHESTER  
DATE

OCT 8 1986

BUREAU OF LAND MANAGEMENT  
ROSWELL RESOURCE AREA

\*See Instructions on Reverse Side