

(November 1983)
(Formerly 9-331)

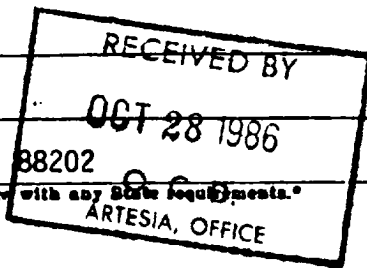
UNITED STATES NM Oil Cons. Commission
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
Artesia, NM 88210

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 ☐ GAS WELL ☒ OTHER	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR McKay Oil Corporation	8. FARM OR LEASE NAME Four Mile Draw Fed.
3. ADDRESS OF OPERATOR P.O. Box 2014, Roswell, New Mexico 88202	9. WELL NO. 4
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1930 FEL & 660 FSL	10. FIELD AND POOL, OR WILDCAT W. Pecos Slope Abo
14. PERMIT NO.	15. ELEVATIONS (Show whether SP, RT, CL, etc.) 4207' GL
	16. COUNTY OR PARISH Chaves
	17. 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	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL	CHANGE PLANE	(Other)	
(Other)	Off Lease Measurement	(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.)

A separator and measuring equipment will be installed on the location, but the actual sales point and master meter will be in the SW/4 of the NE/4 of Section 36, Township 6 South, Range 22 East, NMPM, as shown on Exhibit "A".



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

SIGNED Jim Schuster TITLE Landman DATE 10-16-86

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

