

N. 100-100-100-100
(formerly 9-311)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM Oil Cons Commission
STANDARD CRITERIA
Drawn by: 88210
Artesia, NM

45F

EXPIRATION DATE: 1-1-88
5. LEASE DESIGNATION AND PERMIT NO.
NM-32308
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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

2. NAME OF OPERATOR
McKay Oil Corporation

3. ADDRESS OF OPERATOR
P.O. Box 2014, Roswell, New Mexico 88202

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface
1650' FWL & 660' FSL

14. PERMIT NO.

15. ELEVATIONS (Show whether OF, AT, GR, etc.)
4217' GR

RECEIVED BY
MAY -4 1987
O. C. D.
ARTESIA, OFFICE

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
L.L. & E Federal

9. WELL NO.
4

10. FIELD AND POS. OF WILDCAT
W. Pecos Slope-Abo

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 1, T6S, R22E

12. COUNTY OR PARISH
Chaves

13. STATE
N.M.

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	☐	WATER SHUT-OFF	☐
FRACTURE TREAT	☐	FRACTURE TREATMENT	☐
SHOOT OR ACIDIZE	☐	SHOOTING OR ACIDIZING	☐
REPAIR WELL	☐	(Other)	☐
(Other)	NPL-2B	(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.)

In accordance with Section VII., "Disposal Facilities for New Wells", operator requests the 90 day temporary disposal into unlined pits. Such time is requested to accurately measure well to determine salt water production(if any). Salt water will be disposed in the working pits.

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

SIGNED: [Signature] TITLE: Landman DATE: 4/27/87

(This space for Federal or State office use)

APPROVED BY: [Signature] TITLE: [Signature]
CONDITIONS OF APPROVAL, IF ANY:

APPROVED FOR - MONTH PERIOD
ENDING AUG 27 1987
*See Instructions on Reverse Side

APPROVED
DATE
PETER W. CHESTER
APR 29 1987
BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA