

(November 1983)
(Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN 1
18-041 Cons. Comm. Division
verse side)

Expires August 31, 1985

45F

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.)

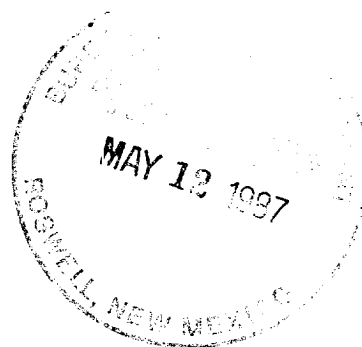
1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	2. NAME OF OPERATOR McKay Oil Corporation	3. ADDRESS OF OPERATOR Post Office Box 2014, Roswell, New Mexico 88201	4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FSL & 660' FEL	5. LEASE DESIGNATION AND SERIAL NM-32323-A	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	7. UNIT AGREEMENT NAME	8. FARM OR LEASE NAME Five Mile Tank Federal	9. WELL NO. #3	10. FIELD AND POOL OR WILDCAT W. Pecos Slope Abo	11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA Sec. 17-6S-23E	12. COUNTY OR PARISH Chaves	13. STATE NM
14. PERMIT NO.				15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4118' GR				RECEIVED BY MAY 19 1987 O. C. D. ARTESIA, OFFICE				

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) Production casing	<input checked="" type="checkbox"/>		
(Note: Report results of multiple completion on Well Completion or Reconpletion 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.) *							

2-4-87

Ran in hole w/82 jts. 4 1/2" ER3, 9.5# casing, set @ 3400'.
Cemented w/325 sxs. 65/35 POZ w/2% gel, 9/10th of 1% Halad
4, 3/10th of 1% CFR3, 5# salt. Cemented 1" from 1425' to
surface w/250 sxs. Halliburton Lite. Plug down @ 9:15 p.m.



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

SIGNED Theresa Rodriguez TITLE Production Analyst DATE 5-11-87
(This space for Federal or State office use)

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

ACCEPTED FOR RECORD PETER W. CHESTER DATE MAY 18 1987 BUREAU OF LAND MANAGEMENT ROSWELL RESOURCE AREA
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*See Instructions on Reverse Side