

UNITED STATES OF AMERICA
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
Artesia, NM 88210

Expires Aug 31, 1985
5. LEASE DESIGNATION AND SERIAL
NM-32322-A
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" or such proposal.)

1. ☐ OIL WELL ☐ GAS WELL ☒ OTHER

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

RECEIVED BY
MAR -2 1987
O. C. D.
ARTESIA OFFICE

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Middle Fork Federal

9. WELL NO.
#2

10. FIELD AND POOL OR WILDCAT
W. Pecos Slope Abo

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Section 8-6S-23E

12. COUNTY OR PARISH
Chaves

13. STATE
NM

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
4178' GR

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"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other) Spud and Surface casing	<input checked="" type="checkbox"/>
(Other)	<input type="checkbox"/>	(Other)	<input 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.)

2-3-87 Spudded 12 1/4" hole @ 3 p.m.

2-6-87 Ran in hole w/30 jts. 8 5/8" used, R3, 32# casing, set @ 1221', cemented w/150 sxs. Halliburton Lite w/4% CaCl, 150 sxs. Premium Plus w/2% CaCl, plug down @ 5:30 p.m. 2-5-87. Ran in hole w/1" pipe, brought cement to surface using 260 sxs Premium Plus w/4% CaCl, 400 gals. flocheck, 7 plugs w/1", circ. cmt. Ran TS, survey indicated TOC @ 600'.

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

SIGNED Theresa Rodriguez TITLE Production Analyst DATE 2-10-87

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
PETER W. CHESTER
DATE
FEB 26 1987
BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

*See Instructions on Reverse Side