

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN
Conservation Mission
Drawer DD

415F
Original Form 3160-5
Expires August 31, 1985

LEASE DESIGNATION AND SERIAL

NM-32308

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 ☐	JUL 20 1987 O. C. D.	UNIT AGREEMENT NAME
2. NAME OF OPERATOR McKay Oil Corporation		8. FARM OR LEASE NAME L L & E Federal
3. ADDRESS OF OPERATOR Post Office Box 2014, Roswell, New Mexico 88201		WELL NO. #2
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1400' FWL & 660' FEL		10. FIELD AND POOL OR WILDCAT W. Pecos Slope Abo
		11. SEC., T., R., M., OR B.L. AND SURVEY OR AREA Section 12-6S-22E
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4186' GL	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 ☐	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 PLANS ☐	(Other) ☒ Commenced gas sales	(Other) ☒

(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.) *

Commenced gas sales to pipeline on 7-7-87



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

SIGNED <u>Theresa Rodriguez</u>	TITLE <u>Production Analyst</u>	DATE <u>7-10-87</u>
(This space for Federal or State office use)		
APPROVED BY <u>William Meyer, Acting</u>	TITLE <u>Area Manager</u>	DATE <u>JUL 16 1987</u>
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side