

(November 1984)
(Formerly 9-331)

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

Expires Aug. 31, 1985
5. LEASE DESIGNATION AND SERIAL
NM-36191
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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR McKay Oil Corporation	8. FARM OR LEASE NAME Pierce Federal
3. ADDRESS OF OPERATOR Post Office Box 2014, Roswell, New Mexico 88201	9. WELL NO. #10
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 2108' FWL & 600' FSL	10. FIELD AND POOL, OR WILDCAT W. Pecos Slope Abo
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 5-6S-22E
15. ELEVATIONS (Show whether DF, RT, GR, etc.)	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 <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"/>	REPAIRING WELL <input type="checkbox"/>
(Other) <input type="checkbox"/>	(Other) <input checked="" type="checkbox"/> Spud & surface casing
PULL OR ALTER <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
MULTIPLE COMPLETE <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
ABANDON <input type="checkbox"/>	
CHANGE PLANS <input type="checkbox"/>	

(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 surface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

2-13-87 Spudded 12 1/4" hole @ 10:30 p.m.

2-14-87 Ran in hole w/21 jts. 8 5/8", 24#, J-55 casing, set @ 924', cemented w/50 sxs. Premium Plus w/4% CaCl, 150 sxs. Halliburton Lite w/4% CaCl, 100 sxs. Premium Plus w/2% CaCl, plug down @ 12 a.m.. Ran TS, survey indicated TOC @ 690', tagged @ 609', plug #1 - 549' cemented w/35 sxs. Premium Plus w/4% CaCl, tagged @ 650', plug #2 - 580' cemented w/35 sxs., tagged @ 450'; plug #3 428' cemented w/35 sxs. Premium Plus w/4% CaCl, tagged @ 334'; plug #4 - 306' cemented w/35 sxs. Premium Plus w/4% CaCl, tagged @ 276'; plug #5 - 246' cemented w/35 sxs. Premium Plus w/4% CaCl, tagged @ 276'; plug #6 - 246' cemented w/35 sxs. Premium Plus w/4% CaCl, tagged @ 276'; plug #7 - 246' cemented w/35 sxs. Prem. Plus w/4% CaCl and 200 gals. flocheck, tagged @ 120'; plug #8 90' cemented w/35 sxs. Premium Plus w/4% CaCl, tagged @ 80'; plug #9 - 60' cemented w/35 sxs. Premium Plus w/4% CaCl, tagged @ 60'; plug #10 - 60' cemented w/35 sxs. Premium Plus w/4% CaCl, Tagged @ 60', for a total of 350 sxs. Premium Plus w/4% CaCl & 200 gals. flocheck.

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

SIGNED Theresa Rodriguez TITLE Production Analyst DATE 2-23-87

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD
PETER W. CHESTER
DATE
FEB 27 1987
BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

*See Instructions on Reverse Side