

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

NM Oil Conservation Commission
Submittal Instructions
(Reverse Side)

Form approved
Budget Bureau No. 1004-1
Expires August 31, 1985

457

SUNDRY NOTICES AND REPORTS ON WELLS RECEIVED

(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: 990' FSL & 660' FWL

14. PERMIT NO. _____ 15. ELEVATIONS (Show whether DF, RT, GR, etc.): 4282' GR

5. LEASE DESIGNATION AND SERIAL: NM-32312

6. IF INDIAN, ALLOTTEE OR TRIBE NAME: _____

7. UNIT AGREEMENT NAME: West Fork Unit

8. FARM OR LEASE NAME: WEST FORK UNIT

9. WELL NO.: 2

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

11. SEC., T., E., M., OR B.L. AND SURVEY OR AREA: Sec. 7, T5S, 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 | <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) | <input type="checkbox"/> |
| (Other) Caliche Pit Location | <input type="checkbox"/> | | |
| PULL OR ALTER CASING | <input type="checkbox"/> | REPAIRING WELL | <input type="checkbox"/> |
| MULTIPLE COMPLETE | <input type="checkbox"/> | ALTERING CASING | <input type="checkbox"/> |
| ABANDON* | <input type="checkbox"/> | ABANDONMENT* | <input type="checkbox"/> |
| CHANGE PLANS | <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.)*

Operator proposes to purchase surfacing materials from a private pit located in the NW/4, Sec. 34, T4S, R22E.

Original purchase location: federal pit NW/4 SE/4, Sec. 33, T4S, R22E.



18. I hereby certify that the foregoing is true and correct
SIGNED: *Peter W. Franklin* TITLE: Agent DATE: July 12, 1988

ACCEPTED FOR RECORD
PETER W. CHESTER
DATE: JUL 14 1988
BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

*See Instructions on Reverse Side