

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

Budget Bureau No. 1004-0
Expires August 31, 1985
5. LEASE DESIGNATION AND SERIAL

NM-32324

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 well or to rework a well.
Use "APPLICATION FOR PERMIT" for such proposals.)

1. NAME OF OPERATOR
McKay Oil Corporation
2. ADDRESS OF OPERATOR
Post Office Box 2014, Roswell, NM 88201
3. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below)
At surface

APR 18 '88

O. C. D.

ARTESIA, OFFICE

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

M & M Federal

9. WELL NO.

#5

10. FIELD AND POOL OR WILDCAT

W. Pecos Slope Abo

11. SEC., T., R., M., OR BLM. AND
SURVEY OR AREA

Sec. 19-6S-23E

12. COUNTY OR PARISH 13. STATE

Chaves

NM

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)

4082' GR

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETION

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

Spud

(NOTE: Report results of multiple completion on Well
Completion or Reconpletion Report and Log form.)

17. TO BE FILLED 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.) *

3-31-88 Spudded 12 1/4" starter hole @ 6 p.m.

RECEIVED
APR 5 7 30 AM '88
BUREAU OF LAND MANAGEMENT
ROSWELL RESOURCE AREA

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

SIGNED Sheresa Rodriguez

TITLE Production Analyst

DATE 4-4-88

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

