NM OIL CONS. COMMISSION

Form 3160-5 (June 1990)

UNITEDESTATES DEPARTMENT OF THE INTERIOR DUDEAU OF LAND MANAGEMENT 30-015-21561

FORM APPROVED Budget Bureau No. 1004-0135

Expires: March 31, 1993 5. Lease Designation and Serial No.

SUNDRY NOTICES Do not use this form for proposals to dr Use "APPLICATION FO	AND REPORTS ON WELLS III or to deepen or reentry to a different reservoir. R PERMIT—" for such proposals THE TRUE LOATE RECEIVED	NM-34647 6. If Indian, Allottee or Tribe Name 7. If Unit or CA, Agreement Designation
SUBMIT	IN TRIPLICATE RECEIVED	
1. Type of Well Oil Well Well Other	AUG 1 6 1991	8. Well Name and No.
2. Name of Operator MCKay Oil Corporation	O. C. D. ARTESIA, OFFICE	Charolette McKay Fed 9. API Well No.
3. Address and Telephone No. P.O. Box 2014, Roswell,	NM 88202 (505) 623-4735	#3 10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey D 1980 'FWL-660 'FNL	W, C	Dagger Draw South 11. County or Parish, State Eddy, NM
Section 25, T-20S, R-24E	E, NMPM (s) TO INDICATE NATURE OF NOTICE, REPO	
TYPE OF SUBMISSION	TYPE OF ACTION	
X Notice of Intent	Abandonment Recompletion	Change of Plans New Construction
Subsequent Report	Plugging Back Casing Repair	Non-Routine Fracturing Water Shut-Off
Final Abandonment Notice	Altering Casing Other Reentry	Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
13. Describe Proposed or Completed Operations (Clearly state give subsurface locations and measured and true vert	all pertinent details, and give pertinent dates, including estimated date of starticial depths for all markers and zones pertinent to this work.)*	ng any proposed work. If well is directionally drilled,

It is proposed to reenter the Coquina R.S. Federal #1 well and attempt

to complete in the Canyon at approximately 7,800'. The proposed date to start operations is on or before August 8, 1991.

OTD- 9810 PYA- 7-13-75 3606 GR

14. I hereby certify that the foregoing is true and correct	Title		Date7-29-91
Signed State office use)	1100		
(This space for Federal or State office use)	Title	ARBA AFTE AND INCOME	Date _ 8-14 9/
Approved by	11uc	DARLAGAD RESCURIE ADEL	-