

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

FORM APPROVED BY  
Budget Bureau No. 1004-011  
Expires August 31, 1985  
LEASE DESIGNATION AND SERIAL NO.

45F

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.)

RECEIVED

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 1503' FNL & 330' FEL

14. PERMIT NO. \_\_\_\_\_

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
4285' GR

NM-32312

6. IF INDIAN, ALLOTTEE OR TRIBE NAME \_\_\_\_\_

7. UNIT AGREEMENT NAME \_\_\_\_\_

8. FARM OR LEASE NAME West Fork Federal

9. WELL NO. 8

10. FIELD AND POOL OR WILDCAT W. Fork Slope Abo

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 12, T5S, R21E

12. COUNTY OR PARISH Chaves

13. STATE N.M.

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

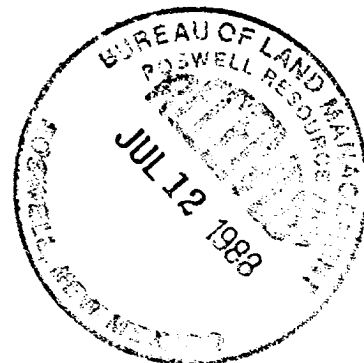
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other)	<input type="checkbox"/>
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 PLANE	<input type="checkbox"/>		

(Other) APD Extension ☒

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 requests a one(1) year extension of the Application for Permit to Drill on the above referenced location.

EXPIREN INTENT 2-12-96  
30-005-62489



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

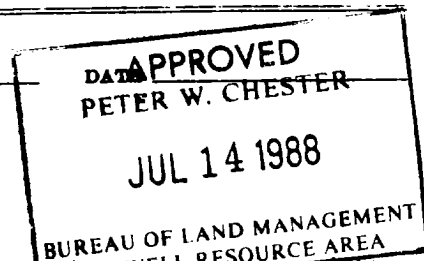
SIGNED Peter W. Chester TITLE Agent DATE July 12, 1988

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

APPROVED FOR — MONTH PERIOD  
ENDING MAY 19 1989

\*See Instructions on Reverse Side



30-002-43489  
EXPIRED INTENT 2-12-90