

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Revised 2/10/05

Form C-103
Revised June 10, 2003

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" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NO. 30-005-63663
1. Type of Well: Oil Well ☐ Gas Well ☒ Other		5. Indicate Type of Lease STATE ☐ FEE ☐
2. Name of Operator McKay Oil Corporation		6. State Oil & Gas Lease No. NM 91498
3. Address of Operator PO Box 2014 Roswell, NM 88202-2014		7. Lease Name or Unit Agreement Name Cactus Com Fed #7
4. Well Location Unit Letter <u>O</u> : <u>660</u> feet from the <u>South</u> line and <u>2310</u> feet from the <u>East</u> line Section <u>35</u> Township <u>6S</u> Range <u>22E</u> NMPM Chaves County		8. Well Number #7
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4153 GL		9. OGRID Number 014424
		10. Pool name or Wildcat West Pecos Abo Slope

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☒
OTHER: ☐

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

MCKAY OIL CORPORATION CEMENTED THE 5 1/2 CASING WITH J-55, 15.5# AT 3193' WITH 300 SKS PREMIUM PLUS 2% CACL ON THURSDAY, JANUARY 20, 2004. PLEASE SEE ATTACHED FIELD INVOICE FROM ACTUAL CEMENT JOB INCLUDING ALL PLUGS, TOC AND TIME FRAME.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Tammy Grube TITLE Production Analyst DATE: 1/28/2005

Type or print name Tammy Grube E-mail address: tammy@mckayoil.com Telephone No. 505-623-4735

(This space for State use)

APPROVED BY FOR RECORDS ONLY DATE FEB 22 2005
Conditions of approval, if any:

RECEIVED

FEB 11 2005

OFFICIALS



UNLOCK YOUR POTENTIAL

Cement Report

Date: 20-Jan-05	District: MIDLAND	Job No: 5512650573	Customer: MCKAY OIL CORP.
Well: CACTUS FEDERAL COM	Lease: # 7	Field: 0-Jan	Salesman: ACKLIN
County: CHAVES	State: NEW MEXICO		

WELL DATA	☐ Surface ☐ Intermediate ☒ Long String ☐ Squeeze ☐ Plug/Whipstock	CAPACITIES
Tubing Size: 0	Depth: 0 ft.	BH Static Temp: n/a
Tubing Wt: n/a		BH Circ. Temp: n/a
Casing Size: 5 1/2 ✓	Depth: 3193 ft.	Plug Set At: n/a
Casing Wt: n/a		Plug Set At: n/a
Packer/DV: n/a	Set At: 0'	Plug Set At: n/a
Hole Size: 7 7/8		Plug Set At: n/a
Tubing(bbls/ft): Casing(bbls/ft): 0.0238 Annulus(bbls/ft):		

FLUID DATA					
Fluid	No. Sacks	Cement	Wt. (lbs/gal)	Vol. (bbls)	Additives or Description
Scavenger					
Lead Slurry					
Tail Slurry	300 ✓	PREMIPLUS	14.60	71 bbls	2% CACL
Displacement	FW			75 bbls	
Preflush					

TREATMENT DATA						
Time AM / PM	Surface Treating Pressure (psi)		Slurry Rate (bpm)	Stage & Total bbls. Pumped		Comments
	Pipe	Annulus		Stage	Total	
8:00					0	ON LOCATION / SPOT EQUIPMENT
					0	SAFETY MEETING
					0	RIG UP ON GROUND
2:00					0	JUST FINISHED LOGGING
					0	START RUNNING CSNG
5:00					0	RIG UP ON FLOOR
					0	RIG CIRCULATE 15 MIN.
9:15	0-500		5.0	10	10	START WATER AHEAD
9:33	500		6.0	71	81	START CEMENT
9:43	0				81	S/D
9:47	0		4.0	10	91	WASH UP TO PIT
9:50	0				91	DROP PLUG
9:52	0-400		6.0	0	91	START DISPLACEMENT
10:03	600		3.0	65	156	SLOW DOWN TO LAND PLUG
10:05	1,100		3.0	10	166	LAND PLUG 500# OVER & S/D
					166	CHECK FLOAT & HELD
					166	
					166	
					166	
					166	
					166	
					166	
					166	

Minimum STP (psi)	_____	Maximum:	_____	Average:	0 psi
Minimum Rate (bpm)	_____	Maximum:	_____	Average:	0 bbls
ISDP:	_____	Operator's Max Pressure:	_____		

Customer Rep:	HUMBERTO PEREZ	KEPPS Rep:	OSCAR BAEZA / H.H.
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RECEIVED

FEB 11 2005

OCC-ARTESIA



Pure Pumping Services

District	MIDLAND		Invoice No.	5512650573
RIG #	12	P.O. No.	n/a	
Job Type	L.S.			
Well Type	GAS/OIL			
Salesman	ACKLIN	County	CHAVES	State NEW MEXICO

[illegible]

TERMS: Cash in advance unless KPPS has approved credit prior to sale. Credit terms of sale for approved accounts are total invoice due on or before the 30th day from the date of invoice. Past due accounts may pay interest on the balance past due at the rate of 1 1/2% per month or the maximum allowable by applicable state or federal laws if such laws limit interest to a lesser amount. In the event it is necessary to employ an agency and/or attorney to affect the collection of said account, Customer hereby agrees to pay all fees directly or indirectly incurred for such collection. In the event that Customer's account with KPPS becomes delinquent, KPPS has the right to revoke any and all discounts previously applied in arriving at net invoice price. Upon revocation, the full invoice price without discount will become immediately due and owing and subject to collection.

Customer Rep.

HUMBERTO PEREZ

American Energy Rep.

OSCAR BAEZA / H.H.

Date _____

January 20, 2005

SERVICE ORDER: I AUTHORIZE WORK TO BEGIN PER SERVICE INSTRUCTIONS IN ACCORDANCE WITH TERMS AND CONDITIONS (INCLUDING INDEMNIFICATION OBLIGATIONS) LISTED HERE OR IN THE CUSTOMER CONTRACT FORM AND REPRESENT THAT I HAVE AUTHORITY TO ACCEPT AND SIGN THIS ORDER.

CUSTOMER AUTHORIZED AGENT

Buyer Printed & Stamped 104
Form No 126

HUGHES SERVICES, INC.

Phone (505) 677-3113 / Artesia Answ. Serv. (505) 746-4302

Post Office Box 68 / Loco Hills, New Mexico 88255

TREATMENT REPORT

Date 2-5-04 Lease CACTUS FOOT Well No. 7
Field Peccs slope 150 County CHAVEZ State NM

WELL DATA: Size Tubing 2 3/4 Tubing Perf. _____ Type Packer _____ Set At 2210
Size Casing 5 1/2 Wt. 12 Set From 5112 To BBP 2250 Size Liner _____
Liner Set From _____ To _____ Open Hole: Size _____ From _____ To _____
Casing Perforations: Size _____ Holes Per Foot (16) Intervals 2212-2279
Previous Treatment _____ Prior Production _____

TREATMENT DATA: Pad Used: Yes ☒ No ☐ Pad Type 3 1/2" x 12"
Treating Fluid Type: Oil ☐ Water ☐ Acid ☒ Misc ☐ Foam ☐ Emulsion ☐
Treating Fluid Volume Gals. 1500 Fluid Description: 10% HCl

Ball Seaters: 8 / 16 In 8 Stages of 2
Auxiliary Materials _____
Procedure _____

**FLUID PUMPED AND
CAPACITIES IN BBLs**

Tubing Cap	10.5
Casing Cap	1.3 Batts
Annular Cap	48.4
Open Hole Cap	—
Fluid to Load	2
Pack volume	2
Treating Fluid	36
Flush	18
Overflush	—
Total to Recover	50

Time		Treating Pressure-Psi		Barrels Fluid	Inj. Rate	REMARKS	Totals to Recover
AM / PM	Treating	Casing	Pumped	B.P.M.			
9:26	0				2	START Pump TO LOAD FBL	50
9:29	2500		2.0			SHUT DOWN RSP OK	
9:37						START RSP DOWN	
9:37 1/2	2980					FORMATION BEGINS BACK TO 1400	
9:38	2030				4.0	RATE	
9:39	2000		1		4.0	SHUT DOWN after BY LHS	
9:43	0				2.0	START Pump TO R.K. CIRCULATION	
9:47	250		11		2.0	SHUT DOWN	
9:49	250				0.0	START Acid + R.H.S.	
9:53	250					SHUT DOWN close BY LHS	
9:54	1600				3.0	RATE	
9:55	1800				4.0	RATE	
9:56	1000				1.0	last suction valve on pump	
9:58	950				1.0	SHUT DOWN RSP DOWN close RSP	
10:04	930				.5	Resume Acid	
10:10	930		8.6		1.0	START Flush	
10:13	930		12		1.0	SHUT DOWN	
							</

HUGHES SERVICES, INC.

(505) 677-3113 / Artesia, Answ. Serv. 746-4302

Post Office Box 68 / Loco Hills, N.M. 88255

7484

Date 8-5 1978Sold To McCray Oil Corp Customer's Order No. _____Address _____ Lease Cactus FieldCounty Chaves Well No. 7

It is agreed as a part of the consideration hereof, HUGHES HOT OIL SERVICE, INC. is to treat or service said well as herein ordered, at owners risk, and is not to be liable for any damage that may accrue in connection with said treatment or services. No representations, expressed or implied, have been made, and none have been relied on, as to what may be the effect or results of the treating or service of said well. The consideration of said treatment or services is payable at Loco Hills, New Mexico, on or before the 20th of the following month. No discount allowed. The undersigned represents that he is duly authorized to sign this order for well owner.

175

Service Operator Calvin C. Brown Well Owner Blumenthal or Agent Blumenthal

Code	Service or Product	Unit Price	Total
	1600 gal 1470 H/L	7.10	1146.00
	3 gal NE	12.00	36.00
	7.5 gal FE	18.00	135.00
	3 gal Commission Truck Tow	29.00	87.00
	1400 gal 1470 H/L	1.72	240.80
	1000 gal 1470 H/L	1.95	195.00
	900 gal 1470 H/L	2.40	216.00
	1000 gal 1470 H/L	9.00	900.00
	Truck City		51.20
			2640.00
	Tot		48.60
	3070.00		2713.30
	7.0000 Amt 12.19.78		

Time Leave Yard _____
 Time Arrive Job _____
 Time Lunch Break _____ To _____
 Time Leave Job _____
 Hours Chargeable _____

W/S 1/28/05

HUGHES SERVICES, INC.

Phone (505) 677-3113 / Artesia Answ. Serv. (505) 746-4302
Post Office Box 68 / Loco Hills, New Mexico 88255

TREATMENT REPORT

Date: 1-26-05 Lease: Cactus Field Well No. 7
Field: Paces slope ASO County: Chaves State: N.M.

WELL DATA:

Size Tubing: 2 3/8 Tubing Perf: --- Type Packer: None Set At: 3032
Size Casing: 5 1/2 WT: --- Set From: Surface To: --- Size Liner: ---
Liner Set From: --- To: --- Open Hole: Size: --- From: --- To: ---
Casing Perforations: Size: --- Holes Per Foot: 4 (18) Intervals: 3132-3132
Previous Treatment: --- Prior Production: ---

TREATMENT DATA: Pad Used: Yes ☒ No ☐ Pad Type: 390 No. 1
Treating Fluid Type: Oil ☐ Water ☐ Acid ☒ Misc ☐ Foam ☐ Emulsion ☐
Treating Fluid Volume Gals: 700 Fluid Description: 15% NESE

Ball Sealers: 32 In: 8 Stages of: 4
Auxiliary Materials: ---
Procedure: ---

FLUID PUMPED AND CAPACITIES IN BBLs

Tubing Cap	11.7
Casing Cap	2.4
Annular Cap	53.9
Open Hole Cap	---
Fluid to Load	0
Pad Volume	12
Treating Fluid	17
Flush	14
Overflush	---
Total to Recover	43

Time	Treating Pressure Psi	Gels Per	Gels Pumped	Rate	REMARKS
AM PM	Tubing	Casing		RPM	
11:03	0	open	15	1.0	START Acid To Pickle
11:18	0	"	"	1.0	START Flush
11:28	200	"	12	2.0	START Pump Increase Rate
11:57	220	"	58	2.0	SHUT DOWN ALL Acid BACK
11:58	3000	"	"	"	TEST GSK
11:59	"	"	"	"	OK Bleed off Pressure TOH
					SEALING TO LAST Hole 7 Press. for Backlog
					SHUT DOWN 3000 BOPHOLD 5000 PSI
					11-26-05
11:19					START BRINE Flow
11:20	2300				Emulsion Brine BACK TO 1750 Surface
11:31	2000		1	3.0	SHUT DOWN
11:32	2800		17	4.0	START Acid & BALLS
11:34	2350				BALLS ON
11:37	2950				BALLS ON
11:37	1950				START Flush
11:37.2	3600				SHUT DOWN BALLS SURGE BALLS
11:38	1350				Resume Flush
11:35	2400		14	4.0	SHUT DOWN ALL FLUSH IN
Treating Pressure: Min <u>1750</u> Max <u>3600</u> Avg <u>2300</u> Customer Representative <u>Mr. Humberto Perez</u>					
In. Rate on Treating Fluid <u>4.0</u> Rate on Flush <u>4.0</u>					
Avg. In. Rate <u>4.0</u> S.D.P. <u>1510</u> Holes Per Stage <u>---</u> Distribution <u>---</u>					
Final Shut In Pressure <u>1210</u> In <u>15</u> Minutes <u>5 min</u> <u>1370</u>					
Operator's Maximum Pressure <u>4000</u> <u>12 min</u> <u>1380</u>					
Job Number <u>7478</u>					