Form 3160-5 (November 1994)

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB No. 1004-0135 Expires July 31, 1996

5. Lease Serial No.

SUNDRY NOTICES AND REPORTS ON WELLS  Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.				NM-36192 6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRIPLICATE – Other instructions on reverse side				7. If Unit or CA/Agreement, Name and/or No		
1. Type of Well				8. Well Name and No.		
Oil Well Gas Well Other				LOOKOUT B FEDERAL #3		
2. Name Of Operator				9. API Well No.		
MCKAY OIL CORPORATION				30-005-63754		
3a. Address	3b. Phone No. (include area code)			10. Field and Pool, or Exploratory Area		
P.O. BOX 2014 ROSWELL, NM 88202-2014 505-623-4735				WEST PECOS ABO SLOPE		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				11. County or Parish. State		
810' FSL, & 660' FWL, LOT M, SEC 10, T6S, R22E				CHAVES COUNTY, NM		
12. CHECK APP	PROPRIATE BOX(ES)	TO INDICATE NATUR	E OF NOTIC	E, REPORT, OR	OTHER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION					
☐ Notice of Intent	☐ Acidize	☐ Deepen	Producti	on (Start/Resume)	☐ Water Shut-Off	
	☐ Alter Casing	☐ Fracture Treat	☐ Reclama	tion	☐ Well Integrity	
Subsequent Report	☐ Casing Repair	☐ New Construction	☐ Recomp	lete	Other	
☐ Final Abandonment Notice	☐ Change Plans	Plug and Abandon	☐ Tempora	rily Abandon	SET 8-5/8" CASING	
	Convert to Injection	☐ Plug Back	☐ Water D	isposal		

- 13. Described Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)
  - 1) MCKAY OIL CORPORATION TD OF CASING @ 1030' ON 03/02/06 @ 6:00AM.
  - 2) MCKAY OIL CORPORATION -- ON 03/03/06 RAN 1030' OF 8-5/8", 24#, J-55 CASING. RIG UP CEMENTERS. PUMP 650SKS CLASS "C" W/2% CALCIUM CEMENT. RAN TEMP SURVEY, TAG CEMENT @ 700'. 1" TO SURFACE W/115SKS CLASS "C" 2%KCL. WOC-18 HRS. CASING PRESSURE TESTED TO 500psi -- 30 MIN/TEST GOOD.
  - 3) WITNESSED BY EDDIE FITZPATRICK/BLM.

14. I hereby certify that the foregoing is true and correct				
Name (Printed/Typed)	Title			
CAROL SHANKS	PRODUCTION ANALYST			
Signature / / / / / / / / / / / / / / / / / / /	Date			
(WU) XIVWWY	03/13/2005			
ACCEPTED FOR REHIS SPACE FOR FEDERAL OR STATE OFFICE USE				
Approved By SGD.) DAYID & CLASS	Title	Date		
Conditions of approval, it was a active 06 approval of this notice does not warre or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.  DAVID R. GLAGS		Office		
Title 18 U.S.C. Section Entropy of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.				

Form 3160-5 (November 1994)

## **UNITED STATES** DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB No. 1004-0135 Expires July 31, 1996

## SUNDRY NOTICES AND REPORTS ON WELLS

5. Lease Serial No. NIM 26102

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.			NIVI-1019/		
			6. If Indian, Allott	ee or Tribe Name	
SUBMIT IN TRIPL	ICATE – Other insti	ructions on reverse	e side	7. If Unit or CA/A	greement, Name and/or No
1. Type of Well	· · · · · · · · · · · · · · · · · · ·			8. Well Name and	No.
Oil Well Gas Wel	l Other			LOOKOUT B	FEDERAL #3
2. Name Of Operator				9. API Well No.	
MCKAY OIL CORPORATION				30-005-63754	
3a. Address		3b. Phone No. (include area code)		10. Field and Pool, or Exploratory Area	
P.O. BOX 2014 ROSWELL, NM 88202-2014		505-623-4735		WEST PECOS ABO SLOPE	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			11. County or Parish, State		
810' FSL & 660' FWL, LOT M, SEC 10, T6S, R22E			CHAVES COUNTY, NM		
12. CHECK API	PROPRIATE BOX(ES)	TO INDICATE NATUR	E OF NOTICE	E, REPORT, OR (	OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION				
☐ Notice of Intent	☐ Acidize	Deepen	Production	on (Start/Resume)	☐ Water Shut-Off
	Alter Casing	Fracture Treat	Reclamat	tion	☐ Well Integrity
Subsequent Report	☐ Casing Repair	☐ New Construction	Recompl	ete	Other
Final Abandonment Notice	☐ Change Plans	☐ Plug and Abandon	☐ Tempora	rily Abandon	TD & 4 1/2 " CASING
	Convert to Injection	☐ Plug Back	☐ Water Disposal		
and zones. Attach the Bond unwithin 30 days following complishall be filed once testing has be the operator has determined that  1) MCKAY OIL COR  2) Cemented the 4-1	epen directionally or recompleteder which the work will be pletion of the involved operationen completed. Final Abandon the site is ready for final insperience of the site with the sit	te horizontally, give subsurface formed or provide the Bond ins. If the operation results in ment Notices shall be filed onlection.)  The of 3106' on May 10.5# with 290 SKS	e locations and model No. on file with a multiple complety after all requires arch 12, 200	easured and true vertice BLM/BIA. Required etion or recompletion ments, including recla	d work and approximate duration cal depths of all pertinent markers I subsequent reports shall be filed in a new interval, a Form 3160-4 mation, have been completed, and 3/12/06. WOC-18Hrs.
Pressure tested c	asing to 2500psi for	30 min/good test.			

14. I hereby certify that the foregoing is true and correct				
Name (Printed/Typed)	Title			
CAROL SHANKS	PRODUCTION CLERK			
Signature Wal Shanks	Date 3/13/2006			
ACCEPTED FOR REGISTRACE FOR FEDERAL OR STATE OFFICE USE				
Approved By SED.) DAVID E. CLASS	Title	Date		
Conditions of approval, if any, are attached. Approval of this notice does not warra or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.  DAVID R. GLASS	nt Office			
Title 18 U.S.Q. Section F000 Library berson knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.				

3) Witnessed by Eddie Fitzpatrick/BLM.