Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103	
Energy, Minerals and Natural Resources 1625 N. French Dr., Hobbs, NM 88240 RECEIVED		al Resources	Revised June 10, 2003 WELL API NO.	
			30-005-61403	
District II 1301 W. Grand Ave., Artesia, NM 8821 DEC - 1 2003 CONSERVATION DIVISION District III 1220 South St. Francis Dr.			5. Indicate Type	
1000 Rio Brazos Rd., Aztec, NM 870CD-ARTESIA Santa Fe, NM 87505			STATE 6. State Oil & Ga	FEE L
1220 S. St. Francis Dr., Santa Fe, NM 87505			32323	is Lease IVO.
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			7. Lease Name or Unit Agreement Name Five Mile Tank Federal 2Z	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			Tive wife Tank I	cuciai ZZ
PROPOSALS.) 1. Type of Well:			8. Well Number	
Öil Well ☐ Gas Well ☒ Other			2Z ·	
2. Name of Operator			9. OGRID Number	
McKay Oil Corporation 3. Address of Operator			014424 10. Pool name or Wildcat	
PO Box 2014 Roswell, NM 88202-2014			Abo Wildcat	
4. Well Location				
Unit LetterJ:18	80feet from theSouth_	line and1	980feet from th	eEastline
Section 9	Township 6S	Range 23E	NMPM	Chaves County
T 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Elevation (Show whether DR,			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
			SEQUENT RE	
	UG AND ABANDON	REMEDIAL WORK		ALTERING CASING
TEMPORARILY ABANDON	IANGE PLANS	COMMENCE DRIL	LING OPNS.	PLUG AND ABANDONMENT
	JLTIPLE DMPLETION	CASING TEST AN CEMENT JOB	D. 🗆	
OTHER:			nporarily Abandon	
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.				
11/21/03 SITP = 0 Csg = 900. Bled well down 1 hour. Came out of hole with 102 jts tubing. Work on rig.				
11/24/03 Rig up wireline, put cast iron plug, set it at 3230'. Run 10' of cement, load casing with 2% KCL. Tested for 30 minutes with 500# - held. Rig down.				
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Tomporery Abenduned States expressed				
	,	· iniques show	19706)
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE Maretto Whillington TITLE Production Analyst DATE 11/25/03				
Type or print name Nanette Whittington	n E-mail address: n	anette@mckayoil.co	om Telephone	e No. 505-623-4735
(This space for State use))	A -N·N	1 7	-
APPPROVED BY	TITLE	Juld &	SO E	DATE
Conditions of approval, if any:				
			APPROVE	D DEC 2 2003

