

Submit 3 Copies To Appropriate District Office

District I

1625 N. French Dr., Hobbs, NM 88240

District II

811 South First, 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

Form C-103
Revised March 25, 1999

WELL API NO.
30-005-62625

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
LG-5555

7. Lease Name or Unit Agreement Name:
West Fork Unit

7. Well No.
1

8. Pool name or Wildcat
Pecos Slope Abo, West (Gas)

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-110) FOR SUCH PROPOSALS.)

1. Type of Well:

Oil Well ☐ Gas Well ☒ Other ☒

2. Name of Operator

McKay Oil Corporation

3. Address of Operator

PO Box 2014, Roswell, NM 88202-2014

4. Well Location

Unit Letter C : 660 feet from the North line and 1780 feet from the West line

Section 32

Township 4S

Range 22E

NMPM

Chaves

County

10. Elevation (Show whether DR, RKB, RT, GR, etc.)
4430' GR

11. 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: ☐

12. 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 recompilation.

McKay Oil plans to deepen well as follows:

Drill the casing shoe on the plug backed cement. Clean out the existing wellbore below the casing shoe to the original TD of 4508'. Set a liner and commence testing of the deeper zones.

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

SIGNATURE Tricia Moore TITLE Production Analyst DATE 02/27/2002

Type or print name Tricia Moore

Telephone No. 505.623.4735

(This space for State use)

APPROVED BY Denied TITLE _____ DATE _____

Conditions of approval, if any: Please submit on C101 & C102