

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address McKay Oil Corporation P.O. Box 2014 Roswell, NM 88201		OGRID Number 014424
		Reason for Filing Code NW
API Number 30 - 00563155	Pool Name West Pecos Slope Abo	Pool Code 82740
Property Code 21676	Property Name South Four Mile Draw "B" Fed.	Well Number 1

10 Surface Location

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South Line	Feet from the	East/West line	County
F	22	6S	22E	SE/4NW/4	2058	North	1890	West	Chaves

11 Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South line	Feet from the	East/West line	County
F	22	6S	22E	SE/4NW/4	2058	North	1890	West	Chaves

Lee Code	Producing Method Code	Gas Connection Date	C-129 Permit Number	C-129 Effective Date	C-129 Expiration Date
F	F	9-29-98			

II. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
015834	Abo Gas Gathering P.O. Box 2014 Roswell, NM 88201	2825424	G	

V. Produced Water

POD	POD ULSTR Location and Description
	Inst 4-38-00

V. Well Completion Data

Spud Date	Ready Date	TD	PBTD	Perforations
8-27-98	9-28-98	3000'	2975'	275' 2 shots
Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement	
12 1/4"	8 5/8"	912'	130 sx Class C Circ.	
7 7/8"	4 1/2"	2975'	201 sx Class C	

VI. Well Test Data

Date New Oil	Gas Delivery Date	Test Date	Test Length	Tbg. Pressure	Csg. Pressure
	9-29-98	N/A	N/A	302	387
Choke Size	Oil	Water	Gas	AOF	Test Method
11/64			N/A	N/A	F

I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Signature: <i>Bill J. Milstead</i> Printed name: Bill J. Milstead Title: VP - Land & Legas Date: 1-19-99		OIL CONSERVATION DIVISION Approved by: <i>Jim W. Burns</i> SUPERVISOR, DISTRICT II B6X Title: Approval Date: 4-7-cc Phone: 505-623-4735	
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If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature	Printed Name	Title	Date