Form 3160-5 (November 1994)

N.M. Oil Cons. DIV-Dist. 2

FORM APPROVED OMB No. 1004-0135 Expires July 31, 1996 c191

UNIT STATES 1301 W. Great A. onue DEPARTMENT OF THE INTERIOR

Approved By	THIS SPACE	FOR FEDERAL OR	STATI		E USE	Date		
11090	THE SPACE	<u> </u>	STATI	E OFFIC	EUSE			
IMMA								
Signature Date 11/22				2				
NORA CASTILLO				Production Analyst				
Name (<i>Printed/Typed</i>)			itle					
14. I hereby certify that the foregoing is true and correct					FIFRO:	JUM ENGINS		
					ARMA	NDO A. LOPE	7	
					1 //			
					NOV	2 5 20 02		
	et 5 ½ slips and cut off ca						1 .	
11/21/02 R	.I.H. with 97 joints of 5 1/2	½". 15.5# J.55 casing. C	emente	d with 35	0 sks, 50/59 POZ	O FOR RE	CO	
	.D. 3045'							
thereof. If the proposal is to de and zones. Attach the Bond un within 30 days following comp shall be filed once testing has be the operator has determined that	nder which the work will be poletion of the involved operation of the involved operation een completed. Final Abandon	ons. If the operation results nment Notices shall be filed	in a mult	inle comple	etion or recompletion	in a new interva	d, a Form 3160-4	
13. Described Proposed or Complethereof. If the proposal is to de	eted Operation (clearly state a eepen directionally or recomple	all pertinent details, includir ete horizontally, give subsur	g estimat face locati	ions and m	easured and true verti	ical depths of all	pertinent markers	
Final Abandonment Notice	Convert to Injection	Plug Back	a satimat	ad starting	date of any propose	d work and appr	oximate duration	
	Change Plans	Plug and Abandon		Water Di	·	AND T.D.		
Subsequent Report	Casing Repair	New Construction		•	rily Abandon	PRODUCTION		
<u>.</u>	Alter Casing	Fracture Treat		Recomple				
Notice of Intent	Acidize	Deepen		Reclamat		☐ Water 3		
TYPE OF SUBMISSION					on (Start/Resume)	☐ Water S	hut-Off	
	The family beautiful to the family of the family beautiful to the family beaut			ACTION				
12 СИЕСК АРГ	PROPRIATE BOX(ES)	TO INDICATE NATU	RE OF	NOTICE	E, REPORT, OR	OTHEK DAT	A /	
		Tile.						
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 990' FNL & 990' FWL, SEC. 4, T6S, R22E, N.M.P.M.					CHAVES COUNTY, NEW MEXICO			
P.O. BOX 2014, ROSWELL	1 OCD ADTES			11. County or Parish, State				
3a. Address	505-623-4735RECEIVED			WEST PECOS SLOPE ABO				
MCKAY OIL CORPORATION	3h Phone No (include)	3b. Phone No. (include greg gode)			10. Field and Pool, or Exploratory Area			
2. Name Of Operator	(D) A			30-005-63339				
Oil Well Gas Well Other					Pierce "B" Fed #2 9. API Well No.			
1. Type of Well					8. Well Name and No.			
SUBMIT IN TRIPLI	ICATE – Other insti	ructions on revers	se side	-				
SUBMIT IN TRIPLICATE – Other instructions on reverse side					7. If Unit or CA/Agreement, Name and/or No			
abandoned well.	. Use Form 3160-3 (AP	D) for such proposa	ls.		o. II meming a miles			
Do not use this form for proposals to drill or to re-enter an					NM 36191 6. If Indian, Allottee or Tribe Name			
SUNDRY NOTICES AND REPORTS ON WELLS								
BUR	REAU OF LAND MANA	AGEMENTA (CO.)	- 4	384	5. Lease Serial No			

Title 18 U.S.C. Section 1001, makes it a crime for any person 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.

Office

Conditions of approval, if any, are attached. Approval of this notice does not warrant

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.