N.M. O. O. O. STATES STATES OMB No. 1004-0135 EXECUTE: The INTERIOR OMB No. 1004-0135 Expires July 31, 1996

DEPARTMENT OF THE INTERIOR						Expires July 31, 1996				
BUREAU OF LAND MANAGEMENT						5. Lease Ser	5. Lease Serial No.			
SUNDRY NOTICES AND REPORTS ON WELLS						NM 914	98			
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.					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 26903				
1. Type of Well							8. Well Name and No.			
Oil Well Gas Well Other					CACTUS "B" FEDERAL #4					
2. Name Of Operator				:		9. API Well	No.			
MCKAY OIL CORPORATION					A	30-005-	53310			
			3b. Phone No. (include gred, code)			10. Field and	10. Field and Pool, or Exploratory Area			
P.O. BOX 2014, ROSWELL,	05-62 3 -4735	RECH	* ZU()	WEST PE	OS SLO	PE ABO				
4. Location of Well (Footage, Sec., 7		ption)	= 5 00	7 - A	PIES	11. County	or Parish, S	State		
941' FSL AND 823' FEL, SEC	C. 34, T6S, R22E, N.M. L	P.M. JT		" •		-19 ^{Cy}		ry, NEW MEXI	со	
12. CHECK APPR	OPRIATE BOX(ES) T	O IN	DICATE NA	ruki	e be	NOTICE, REPORT,	OR OTH	IER DATA		
TYPE OF SUBMISSION TYPE OF AC						ACTION				
	Acidize		Deepen			Production (Start/Resur	ne) [] Water Shut-O	ff	
Notice of Intent Notice of Intent	Alter Casing		Fracture Treat			Reclamation	C.] Well Integrity		
Cubraguant Papart	Casing Repair		New Constructi	ion	П	Recomplete	×	Other		
Subsequent Report			Plug and Aband		П	Temporarily Abandon	Pr	oduction Casing	and	
Final Abandonment Notice	Change Plans Convert to Injection		Plug Back	2011		Water Disposal	Т.			
13. Described Proposed or Completed thereof. If the proposal is to deepe and zones. Attach the Bond under within 30 days following complete shall be filed once testing has been the operator has determined that the	en directionally or recompleter which the work will be person of the involved operation completed. Final Abandonre site is ready for final inspect	e horize erforme is. If the ment No etion.)	ontally, give subsided or provide the he operation resulting offices shall be file	Bond lts in ed only	No. or a multi y after	ons and measured and du n file with BLM/BIA. Re iple completion or recomp all requirements, includin	equired substitution in a greclamatic	sequent reports sh new interval, a Fo on, have been com	all be filed orm 3160-4	
	2/02 - R.I.H. with 73 joi					Set at 3229, Cement	ea with Sc	ou sxs,		
Pren	nium Plus 50/50 POZ, \$	Set 5	½ slips & cut o	off ca	sing	10000				
11/1	1/02 – T.D. 3200'					N. C.	/ 22 /L	LOP57		
14. I hereby certify that the foregoing	g is true and correct					LHETEO	LEUrice	VOIMEER	_	
Name (Printed/Typed)					مندرا	n Analyst				
NORA CASTILLO				Date	iuciio	n Analyst				
Signature / Ora	Dullo			11/1	5/200		18 o il Schap di		an er ska rajili ser	
	THIS SPACE F	ORI	FEDERAL O	R S	TATE	OFFICE USE		มาร์ ราคา ทัศสต์ชาติก -	្នេច នេះ	
Approved By					Title					
Conditions of approval, if any, are a or certify that the applicant holds legal which would entitle the applicant to con	or equitable title to those rig	notice hts in t	does not warrant he subject lease	t	Office					

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.