

Form 3160-5 (June 1990)

UNITED STATES OF CONSERVATION DIVISION DEPARTMENT OF THE INTERIOR RECEIVED RECLIVED

BUREAU OF LAND MANAGEMENT

FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993

5. Lease Designation and Serial No.

4€

SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals		LC-031741 (B) 6. If Indian, Allottee or Tribe Name
SUBMIT IN TRIPLICATE		7. If Unit or CA, Agreement Designation
1. Type of Well X Oil Gas Other Other		8910088560 8. Well Name and No.
2. Name of Operator Lynx Petroleum Consultants, Inc. 3. Address and Telephone No.		Eumont Hardy Unit No. 4 9. API Well No. 30-025-06679
P.O. Box 1979, Hobbs, NM 88241 505-392-6950 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		10. Field and Pool, or Exploratory Area Eumont Yates Seven
2310' FSL & FEL Sec. 6, T-21S, R-37E		11. County or Parish, State Rivers Queen Lea County, New Mexico
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPO	RT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	
Notice of Intent Subsequent Report Final Abandonment Notice	Abandonment Recompletion Plugging Back Casing Repair Altering Casing Other Temporary Abandonment	Change of Plans New Construction Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well
	Il pertinent details, and give pertinent dates, including estimated date of startical depths for all markers and zones pertinent to this work.)*	Completion or Recompletion Report and Log form.) Ing any proposed work. If well is directionally drilled,
2. Set C.I.B.P. at 3475'.		20 27 27 27 27 27 27 27 27 27 27 27 27 27
 Loaded hole with packer fluid. 		Co (ii)
4. Ran casing integrity test (chart attached). Witnessed by: Steve Cathy (BLM).		
4. Ran casing integrity test (chart attached). Witnessed by: Steve Cathy (BLM). Caffey 5. Rationall: Will be retained for potent use as WIW for secondary recovery APPROVED FOR 12 MONTH PERIOD FNDING 10/25/95		ial efforts.
	APPROVED FOR 12 MONTH PERIOD	W/M.Wise. 1/9/95
	ENDING 10/25/95	,
14. I hereby certify than the foregoing is true and correct Signed	President	
(This space for Federal or State office use) Orig. Signed by Shannon J. Shaw Conditions of approval. if any:	TitleTitle	Date1/9/95

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.





