

N. M. OIL CONS. COMMISSION  
P.O. BOX 1000  
SDBS, NEW MEXICO

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

**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 Form 9-331-C for such proposals.)

1. oil well  gas well  other

2. NAME OF OPERATOR  
Lynx Petroleum Consultants, Inc.

3. ADDRESS OF OPERATOR  
P.O. Box 1666 - Hobbs, NM 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 710' FSL & 2310' FEL  
AT TOP PROD. INTERVAL: Same  
AT TOTAL DEPTH: Same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>		<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>		<input type="checkbox"/>
SHOOT OR ACIDIZE	<input checked="" type="checkbox"/>		<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>		<input type="checkbox"/>
(other)			

5. LEASE  
LC-054687

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Lynx Federal

9. WELL NO.  
#1

10. FIELD OR WILDCAT NAME  
Maljamar-Grayburg San Andres

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 15, T-17S, R-32E

12. COUNTY OR PARISH  
Lea

13. STATE  
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
4059' GL

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

It is proposed to acidize w/4500 gals. 15% HCL; perfs 3975'-3989'. Work to begin immediately.

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SEP 10 1982

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

18. I hereby certify that the foregoing is true and correct

SIGNED James A. Gillham TITLE President DATE 9/10/82

APPROVED BY \_\_\_\_\_ (This space for Federal or State office use)  
TERRY W. CHESTER  
APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

APPROVED  
SEP 16 1982  
FOR  
JAMES A. GILLHAM  
DISTRICT SUPERVISOR

\*See Instructions on Reverse Side

RECEIVED

SEP 17 1982

O.C.D.  
HOBBS OFFICE