

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIP DATE  
(Other instructions  
verse side)

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

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 "APPLICATION FOR PERMIT" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER Last used a a SWD well	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Olsen Energy, Inc.	8. FARM OR LEASE NAME B.V. Lynch "A" Fed
3. ADDRESS OF OPERATOR 16414 San Pedro, Suite 470, San Antonio, Texas 78232	9. WELL NO. 8
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1651' FSL & 660' FEL (Unit "I")	10. FIELD AND POOL, OR WILDCAT Lynch Yates/SR
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 34, T-20-S, R-34-E
15. ELEVATIONS (Show whether DF, RT, CR, etc.) 3760 DF	12. COUNTY OR PARISH LEA
	13. STATE New Mexico

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Test casing to T.A.</u> <input checked="" type="checkbox"/>	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)\*

Well Conditions: 5½" 15.5# casing set at 3689' with cement circulated to the surface. Perforations at 3586-3611' and 3642-3662'. Cast iron bridge plug at 3500' with 40' of cement dumped on plug. Hole loaded with inhibited water.

10-29-91: Pressured casing up to 660#. Pressure decreased to 640# in 30 minutes. (See attached chart.) Had a slight leak on the well head valve. This test was witnessed by New Mexico Oil Conservation Division Personnel.

Olsen Energy, Inc. requests T.A. status for this well.



APPROVED FOR 12 MONTHS PERIOD  
ENDED 10/28/92

18. I hereby certify that the foregoing is true and correct  
SIGNED Dea Morton TITLE Drilling & Production Manager DATE 11-5-91

(This space for Federal or State office use)  
APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE 11/25/91  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

