

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-21424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 18313

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal USA

9. WELL NO.

#1

10. FIELD AND POOL OR WELDEAT

Hilcat

11. SEC. T. R. M. OR B. L. AND
SURVEY OR AREA

13. T24N. R2W

12. COUNTY OR PARISH 13. STATE

Rio Arriba

New Mexico

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 ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Lynco Oil Corporation

3. ADDRESS OF OPERATOR

7890 E. Prentice Ave., Englewood, Colorado 80110

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)

At surface

790' FWL. 1850' INL

14. PERMIT NO.

15. ELEVATIONS (Show whether OF, RT, OR, etc.)

790' Ground

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

TYPE OF INTENTION TO

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR REEL IN

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

SPLITTING OR REPAIR

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE LOGS

Cement Surface

(Other)

*Note: Report results of multiple completion or well
completion or Recompletion Report and Log form.)17. DESCRIBE PROPOSED OR PLANNED OPERATIONS, including details of location, details and give pertinent dates, including estimated date of starting any
proposed work. If well is directionally drilled, give subsurface locations and measure and true vertical depths for all markers and zones perti-
nent to this work.*Cemented 93' of 8 5/8" 24# surface casing with 70 sacks of 2% CaCl. Circulated
5 bbls cement.

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

SIGNED

APPROVED

DATE 7/16/73

(This space for Federal or State Office use)

APPROVED BY
CONDITIONS OF APPROVAL IF ANY

TITLE

DATE

*See Instructions on Reverse Side

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