Form 3160-5 (August 1999)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

| OCD-HOB | BS |
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| OCP | <i>3</i> 5 |

FORM APPROVED OMB No 1004-0135

| Expires November 30 | 200 |
|---------------------|-----|
| Lease Serial No. | |

| 1 | BUREAU OF LAND MANAGEMENT | | 5. Lease Serial No. | |
|--|--|---|---|-------|
| | NOTICES AND REPORTS ON WE | | LC-031622B | |
| Do not use thi abandoned wei | s form for proposals to drill or to re II. Use Form 3160-3 (APD) for such pr | e-enter an roposals. | 6. If Indian, Allottee or Tribe Name | |
| | PLICATE - Other instructions on r | everse side | 7. If Unit or CA/Agreement, Name and/or No. | |
| 1. Type of Well Oil Well Gas Well | 101- | 006 | 8 Well Name and No. | |
| 2. Name of Operator | Other Lay | ection |] % Well Name and No. Reed Sanderson Unit #16 | |
| LYNX PETROLEUM | CONSULTANTS, INC. | | 9. API Well No | |
| 3a. Address P.O. Box | | o. (include area code) | 30-025-04196 | |
| Hobbs, NM 8824 | | 92-6950 | 10. Field and Pool, or Exploratory Area | 0 |
| 4. Location of Well (Footage, Sec., | | Coation 0 | Eumont Yates & Rivers 11. County or Parish, State | Queen |
| T-20S, R-36E | FEL, Unit letter A, | section 9, | Lea, NM | |
| 12. CHECK AP | PROPRIATE BOX(ES) TO INDICATE | NATURE OF NOTICE, R | EPORT, OR OTHER DATA | |
| TYPE OF SUBMISSION | | TYPE OF ACTION | | |
| Notice of Intent | Acidize Deepen Alter Casing Fracture To | | Water Shut-Off Well Integrity | |
| Subsequent Report | Casing Repair New Cons | • | Other | |
| Final Abandonment Notice | Change Plans Plug and A | | pandon | |
| | Convert to Injection Plug Back | · | ny proposed work and approximate duration thereof. ne vertical depths of all pertinent markers and zones. | |
| Well has been | returned to injection to by pressuring up the s. | n. Propose to | | |
| | ATTROVALBISTATE | FEB 1 1 2008 | FEB - 6 2008 | |
| | | 100 112000 | PB 0 Esse | |
| | | HOBBS O | CD LES BABYAK PETROLEUM ENGINEER | |
| NMOCD | sion of this form was of Hobbs on 1-10-08. | requested by | Mark Whitaker of | k ~ |
| I hereby certify that the foregon Name (Printed/Typed) | ng is true and correct | 1 | | |
| Larry R. Scott | , | Title President | | |
| | 0 1 1 | | | |
| Signature Marry R | | Date 1-11-08 | | |
| | THIS SPACE FOR FEDERA | AL OR STATE OFFICE US | | |
| Approved by | | Title | Date FFR 1 2 2008 | |
| Conditions of approval if any, are certify that the applicant holds leg which would entitle the applicant to | attached. Approval of this notice does not war gal or equitable title to those rights in the subject conduct operations thereon. | rant or ct lease Office | 160 2 10 6000 | |
| Title 18 U.S.C. Section 1001 and 7 States any false, fictitious or fraudu | Fitle 43 U.S.C. Section 1212, make it a crime for a selection statements or representations as to any matter | any person knowingly and willfull within its jurisdiction. | y to make to any department or agency of the United | |

