

N. M. OIL CONS COMMISSION
P. O. BOX 192
HOBBS, NEW MEXICO 88240
UNITED STATES

DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form Approved.
Budget Bureau No. 42-R1424

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 ☒ gas ☐ 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: 1980' FSL & 1980' FEL
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO:

- TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

- ☐
☒
☒
☐
☐
☐
☐
☐
☐

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.)*

- 1) Frac treat perfs 3984-90 w/6000 gals. x-linked acid and 11,000 lbs. sand.
- 2) Perf 3852-3936 36 shots
- 3) Acidize perfs 3852-3936 w/ 3024 gals and frac w/ 15,000 gals. gelled water and 32,000 lbs. sand.
- 4) Perf 3780-3798 15 shots
- 5) Acidize perfs 3780-3798 w/ 1260 gals. and frac w/ 13,000 gals. gelled water and 26,000 lbs. sand

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Accepted for record TITLE Vice-President DATE 4/3/84

(This space for Federal or State office use)

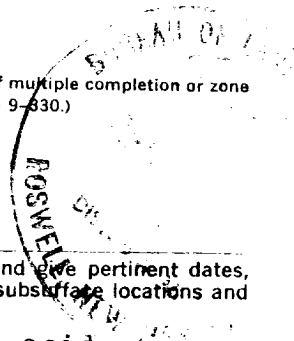
APPROVED BY MAY 18 1984 TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

NEW MEXICO

*See Instructions on Reverse Side

5. LEASE
LC-054687
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Hudson Federal
9. WELL NO.
No. 2
10. FIELD OR WILDCAT NAME
Maljamar Gr-Sa
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)
4044 DF

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



RECEIVED

MAY 22 1984

C.C.O.
HOUS OFFICE