

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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SANTA FE	
FILE	
U.S.O.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
B-2148	

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-		7. Unit Agreement Name
2. Name of Operator Lynx Petroleum		8. Farm or Lease Name Phillips St. XXXX
3. Address of Operator P.O. Box 1666 Hobbs, New Mexico 88240		9. Well No. 3
4. Location of Well UNIT LETTER <u>F</u> <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM THE <u>West</u> LINE, SECTION <u>16</u> TOWNSHIP <u>17S</u> RANGE <u>33E</u> NMPM.		10. Field and Pool, or Wildcat Maljamar Gr-Sa
15. Elevation (Show whether DF, RT, GR, etc.) 4182 GR		12. County Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

- 1) Acidize Existing Perfs 4375-4411 W/2500 gals 15%HCL
- 2) Perforate 4335-43. Fracture Treat W/15,000 gals gel & 15,000#sd
- 3) Acidize existing perfs 4250-4290 W/2500 gal 15% HCL
- 4) Put well back on pump

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED <u>Gary W. Fonay</u>	TITLE <u>V-P</u>	DATE <u>1/28/85</u>
APPROVED BY <u>Eddie W. Seay</u>	TITLE <u>Oil & Gas Inspector</u>	DATE <u>JAN 30 1985</u>
CONDITIONS OF APPROVAL, IF ANY:		

RECEIVED

JAN 29 1985

S.C.D.
HOLLYWOOD