

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 well ☒ gas well ☐ 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: 2310' FNL & 1780' FWL
AT TOP PROD. INTERVAL: Same
AT TOTAL DEPTH: Same

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

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF <input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE <input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES <input type="checkbox"/>	<input type="checkbox"/>
ABANDON* <input type="checkbox"/>	<input type="checkbox"/>
(other) <u>Production Casing</u>	<u>X</u>

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.)*

Drilled 7-7/8" Hole to T.D. (4250')

Ran 100 jts. of 15.5# & 17#, 5 1/2" casing, Total of 4250'
Cemented with 700sxs HOWCO lite + 15# salt/sx + 1#/sx
flocle followed by 300 sxs 50-50 Poz "C" + 2% gel + 1#/sx
flocle + 3#/sx KCL + .3% CFR-2 + .2% Halad-4. Circulated
130sxs cement to surface. Plug down @ 12:15 pm. Plug back
TD is 4200'. WOCU

Subsurface Safety Valve: Manu. and Type _____

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

SIGNED [Signature] TITLE Prod. Mang. DATE 4/30/84

(This space for Federal or State office use)

APPROVED BY ACCEPTED FOR RECORD TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

MAY 8 1984

*See Instructions on Reverse Side

ROSWELL, NEW MEXICO

5. LEASE <u>LC 054687</u>
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME <u>Lynx Federal</u>
9. WELL NO. <u>#5</u>
10. FIELD OR WILDCAT NAME <u>Maljamar Gray - S.A.</u>
11. SEC., T., R., M. OR BLK. AND SURVEY OR AREA <u>Sec. 15, T. 17S, R. 32E</u>
12. COUNTY OR PARISH: 13. STATE <u>Lea NM</u>
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD) <u>4059.5 GB</u>

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