

Form 3160-5
(June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NM-24166
2. Name of Operator Lynx Petroleum Consultants, Inc.	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P.O. Box 1979, Hobbs, NM 88241 505-392-6950	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 660' FNL & 330' FEL Sec. 9, T-19S, R-35E	8. Well Name and No. Sprinkle Federal 2
	9. API Well No. 30-025-28520
	10. Field and Pool, or Exploratory Area Scharb Bone Springs
	11. County or Parish, State Lea County, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other Temporary Abandonment
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

13. 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.)

Extension of Approval for Temporary Abandonment

1. C.I.B.P. at 10,500' with 35' cement.
2. 10# gelled brine from 9,465'-10,465'
3. C.I.B.P. at 9465'
4. Hole loaded with packer fluid.
5. Casing integrity test was O.K.
6. Possible recompletion candidate.
7. Request approval to continue to carry well in a Temporarily Abandoned status.

APPROVED FOR PERIOD
ENDING 6/7/95

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

Signed Mac Wain Title President Date 8/26/94
(This space for Federal or State office use)
(ORIG. SCD.) JOE G. LARA Title PETROLEUM ENGINEER Date 9/26/94
Approved by _____
Conditions of approval, if any: