

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPI
(Other instructions
verse side)

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Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM-55156

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Lynch No. 1

9. WELL NO.

No. 1

10. FIELD AND POOL OR WILDCAT

Lynch Yates Seven Rivers

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec 35 T 20S R 34E

12. COUNTY OR PARISH 13. STATE

Lea

New Mexico

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" for such proposals.)

1. ☒ OIL WELL ☐ GAS WELL ☐ OTHER

2. NAME OF OPERATOR

C. W. Trainer

3. ADDRESS OF OPERATOR

526 Sandy Mountain Dr. Sunrise Beach, Texas 78643

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)

At surface

330 FSL and 1650 FWL

Sec. 35 T. 20S R. 34E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3802 GR

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐

PULL OR ALTER CASING ☐

WATER SHUT-OFF ☐

REPAIRING WELL ☐

FRACTURE TREAT ☐

MULTIPLE COMPLETE ☐

FRACTURE TREATMENT ☐

ALTERING CASING ☐

SHOOT OR ACIDIZE ☐

ABANDON* ☐

SHOOTING OR ACIDIZING ☐

ABANDONMENT* ☐

REPAIR WELL ☐

CHANGE PLANS ☐

(Other) ☒

(Other)

Temporary Abandonment

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

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.)*

We may try to use this well for a disposal well before too long.

APPROVED FOR 12 MONTH PERIOD
ENDING 5/13/86

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

SIGNED

TITLE

DATE 5-6-86

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE 5-13-86

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side