

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED

Budget Bureau No. 1004-0175

Expires September 30, 1990

5. Lease Designation and Serial No.

LC-030143A

6. If Indian, Allottee or Tribe Name

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

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Lynx Petroleum Consultants, Inc.

3. Address and Telephone No.

P.O. Box 1979, Hobbs, NM 88241 505-392-6950

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1980' FSL & 660' FWL
Section 3, T-20S, R-36E

Reed Sanderson Unit

8. Well Name and No.

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9. API Well No.

30-025-04182

10. Field and Pool, or Exploration Area

Eumont-Yates-7Rivers-Queen

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

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other

- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection

Deepen in Same Formation

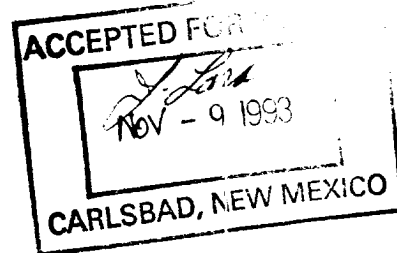
Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form

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.)

1. Drilled 107' of new hole - TD 4098'.
2. Set packer @ 3700' and acidized open-hole section, 3996-4098', with 4000 gals 15% HCL-NE-FE acid in three stages. Diverted between stages with 500# rock salt.
3. Returned well to production.

PLEASE NOTE: Frac treatment was not performed.

Production Prior to work: 5 BO, 40 BW & 8 MCFG
Production After work: 2 BO, 85 BW & 8 MCFG



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

Signed

Darryl L. Scott

Title

Vice President

Date

10/12/93

(This space for Federal or State office use)

Approved by

Conditions of approval, if any

Title

Date