

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.
30025062300081

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
B-11300

7. Lease Name or Unit Agreement Name

Eumont Hardy Unit

8. Well No.
9

9. Pool name or Wildcat
Eumont Yates 7 Rivers Queen

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. Type of Well:
OIL WELL ☐ GAS WELL ☐ OTHER: TA Injection

2. Name of Operator
Lynx Petroleum Consultants, Inc.

3. Address of Operator
P. O. Box 1979, Hobbs, NM 88241

4. Well Location
Unit Letter D : 700 Feet From The North Line and 660 Feet From The West Line

Section 36 Township 20S Range 37E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: Bradenhead Test ☒

12. 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.

Conducted bradenhead test on 8/11/92.

Pressure tested 500 psi. Bled down to 380 psi in 30 minutes.

Chart attached.

This Approval of Temporary
Abandonment Expires

7-1-94

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

SIGNATURE Marc Wise TITLE President DATE 8/26/92

TYPE OR PRINT NAME Marc Wise TELEPHONE NO 392-6950

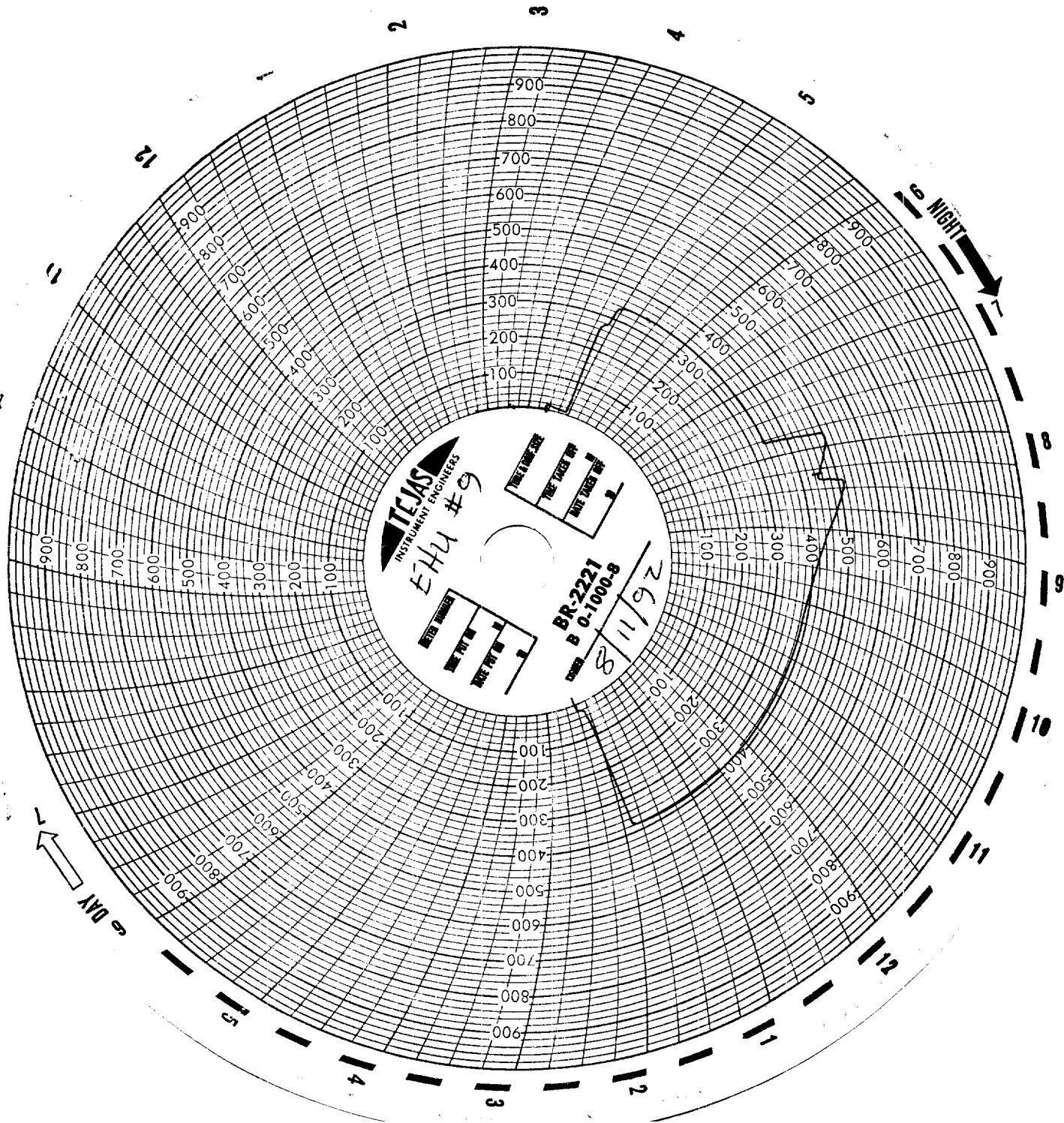
(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE SEP 02 '92

CONDITIONS OF APPROVAL IF ANY.

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SEP 01 1992
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25/11/92
Can not find
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