

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Co.
P.O. Box
Hobbs, NM

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

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	7. If Unit or CA, Agreement Designation
2. Name of Operator Lynx Petroleum Consultants, Inc.	8. Well Name and No. Elliott "31" Fed. #8
3. Address and Telephone No. P.O. Box 1708, Hobbs, NM 88241 505-392-6950	9. API Well No. 30-025-24184
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1650' FNL & 990' FWL Sec. 31, T-24S, R-38E	10. Field and Pool, or Exploratory Area Dollarhide Devonian
	11. County or Parish, State Lea, 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 type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other Temporary Abandonment	<input type="checkbox"/> Dispose Water

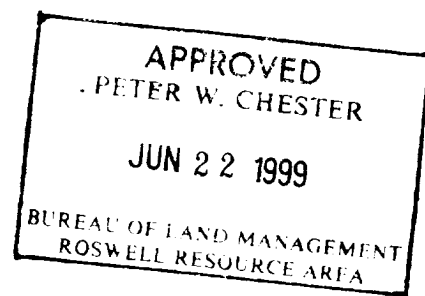
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

TEMPORARY ABANDONMENT STATUS EXTENSION:

1. A C.I.B.P. is set @ 8240' with 35' cement on top.
2. The casing was pressure tested on 7/22/97.
3. This wellbore is being reviewed for a possible recompletion in the Queen interval.

APPROVED FOR MONTH PERIOD
ENDING JUL 22 2000



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

Signed Marc W. Lane Title President Date 6/3/99
(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any: _____