

Submit to Appropriate District Office
State Lease - 6 copies
Fee Lease - 5 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-101
Revised 1-1-89

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OP

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

FEB 01 1993

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

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

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

API NO. (assigned by OCD on New Wells)

30-015-27309

5. Indicate Type of Lease

STATE FEE

6. State Oil & Gas Lease No.

E-1051

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:

DRILL RE-ENTER DEEPEN PLUG BACK

b. Type of Well:

OIL WELL GAS WELL OTHER
SINGLE ZONE MULTIPLE ZONE

7. Lease Name or Unit Agreement Name

State B N

2. Name of Operator

SDX RESOURCES, INC.

8. Well No.

6

3. Address of Operator

P.O. BOX 5061 Midland, TX. 79704-5061

9. Pool name or Wildcat

E.Millman Q-G-SA

4. Well Location

Unit Letter O : 2513 Feet From The East Line and 1310 Feet From The South Line

Section 11 Township 19-S Range 28-E NMPM Eddy County

10. Proposed Depth

2600

11. Formation

Grayburg

12. Rotary or C.T.

Rot

13. Elevations (Show whether DF, RT, GR, etc.)

3433 GR

14. Kind & Status Plug. Bond

Blanket

15. Drilling Contractor

Capstar

16. Approx. Date Work will start

Feb. 01

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12-1/4"	8-5/8"	24#	350'+	300	surf
7-7/8"	5-1/2"	15.50#	2600'	500	surf

POST IO-1
2-5-93
NEWLOG-API

Plan to drill a 12-1/4" hole to approx. 350'; set 8-5/8" surface casing. Circulate "C" cement. Drill 7-7/8" hole to TD. Run open hole logs (LDT-CNL-GR & DLL). Run 5-1/2" casing and circulate 50/50 POZ "C" cement. Perforate the Grayburg-Queen and stimulate as necessary for optimum production.

Mud Program: Fresh water mud 0'-350'
Salt water mud 350'-TD.

APPROVAL VALID FOR 180 DAYS
PERMIT EXPIRES 8-3-93
UNLESS DRILLING UNDERWAY

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

SIGNATURE Chuck Morgan TITLE Engr. DATE 1/29/93

TYPE OR PRINT NAME Chuck Morgan TELEPHONE NO. 748-9814

(This space for State Use)

APPROVED BY Mark Kelly TITLE Biologist DATE 2-3-93

CONDITIONS OF APPROVAL, IF ANY:

* NSL # 3219

Submit to Appropriate
District Office
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Form C-102
Revised 1-1-89

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WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

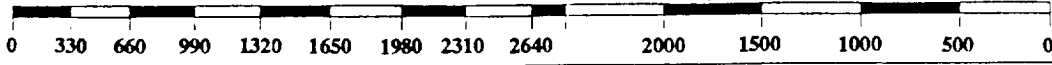
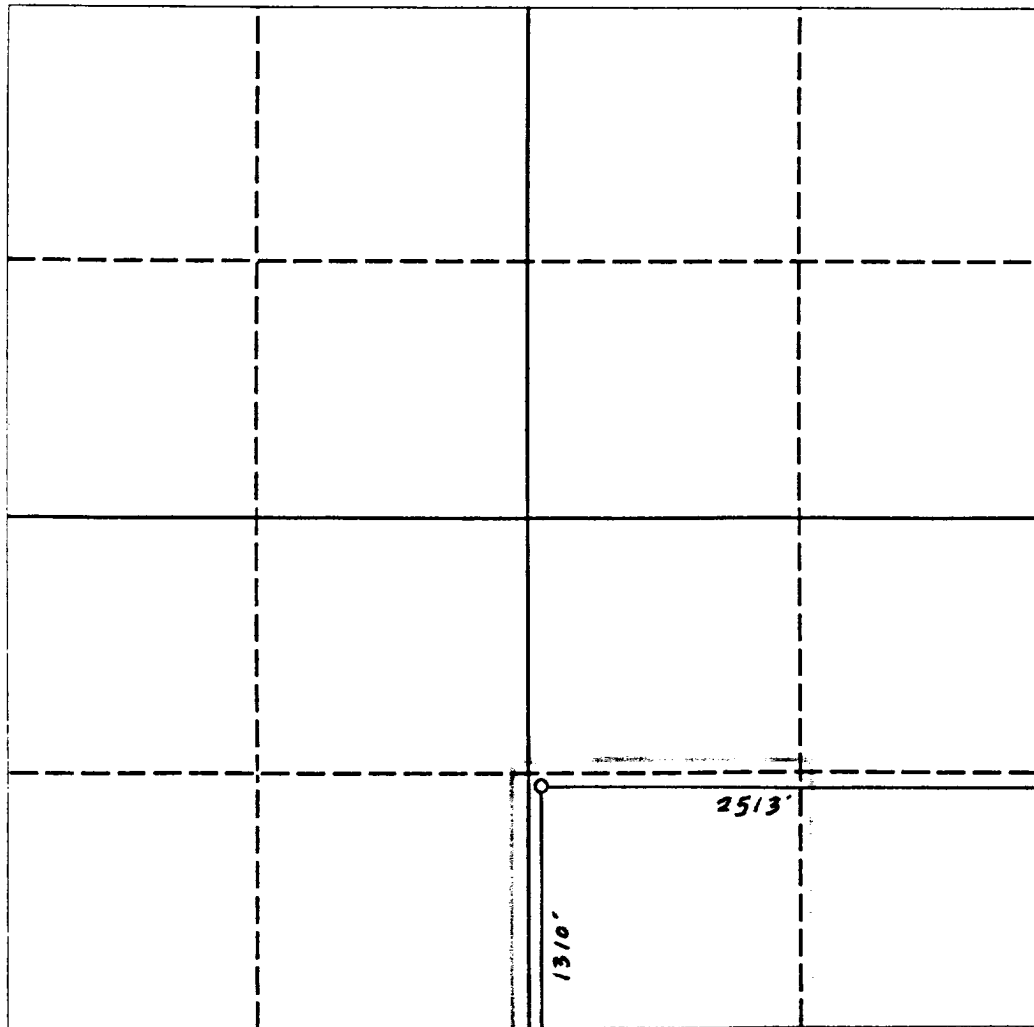
Operator SDX RESOURCES, INC.			Lease STATE BN			Well No. 6		
Unit Letter 0	Section 11	Township 19 SOUTH	Range 28 EAST	County EDDY COUNTY, NM				
Actual Footage Location of Well: 1310 feet from the South line and 2513 feet from the East line								
Ground level Elev. 3433	Producing Formation Q-Gb.			Pool East Millman Q-G-SA.		Dedicated Acreage: 40 Acres		

- Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.?

Yes No If answer is "yes" type of consolidation _____

If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.



OPERATOR CERTIFICATION

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

Signature *Chuck Morgan*

Printed Name **Chuck Morgan**

Position **Engr.**

Company **SDX Resources**

Date **1/29/93**

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed **JANUARY 29, 1993**

Signature & Seal of Professional Surveyor

W. B. ...

REGISTERED PROFESSIONAL ENGINEER

Certificate No. **5412**

NM PE&S PROFESSIONAL ENGINEER

