

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Oil Cons.
N.M. DIV-Dist. 2
1301 W. Grand Avenue
Artesia, NM 88210

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

Lease Designation and Serial No.
NM-18626

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 ☒ P4A

2. Name of Operator
SDX Resources, Inc.

3. Address and Telephone No.
PO Box 5061, Midland, TX 79704 915/685-1761

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
660' FSL, 660' FEL,
Sec 24, T26S, R30E, Unit P



6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Amoco Federal #1

9. API Well No.

30-015-29462

10. Field and Pool, or Exploratory Area

Ross Draw, Delaware, E.

11. County or Parish, State

Eddy Co., 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 checked="" 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 type="checkbox"/> Other	<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.)

12/26/01 - Clean location, remove all equipment and flowline rip & re-seed location as per BLM specifications.

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

Signed Bonnie Chavater

Title Regulatory Tech

Date 01/05/02

(This space for Federal or State office use)

(ORIG. SGD.) JOE G. LARA

Deputy Assistant Secretary

Approved by
Conditions of approval, if any:

Title

Date 2/20/2002

Ttl
st

Accepted for record

only

FEB 22 2002

I hereby certify and willfully to make to any department or agency of the United States any false, fictitious or fraudulent

*See Instruction on Reverse Side

RECEIVED
2002 JUN 14 AM 10:10
BUREAU OF LAND MANAGEMENT
1000 N. 1000 E.