

List of all offset lease and surface owners that were sent
Certified letters of notification.

- 1) Bass Enterprises Production Co. 915/683-2277
PO Box 2760
Midland, TX 79702-2760
- 2) Conoco, Inc. 915/686-5400
Attn: David Scott
10 Desta Dr #100W
Midland, TX 79705-4500
- 3) Frostman Oil 505/746-3344
PO Box 900
Artesia, NM 88211
- 4) Heyco 505/623-6601
PO Box 1933
Roswell, NM 88202
- 5) Mitchell Energy 713/377-5500
PO Box 4000
The Woodlands, TX 77380-4000
- 6) S&J Operating, Co. 817/723-2166
PO Box 2249
Wichita Falls, TX 76307

SDX RESOURCES, INC.

P.O. BOX 5061

MIDLAND, TEXAS 79704

(915) 685-1761

March 1, 1996

ADDRESS

Re: Application for Authority to Inject
Section 7, T19S, R29E
Eddy Co., New Mexico

Gentlemen:

SDX Resources, Inc. is adding all of the Conoco 7 State wells to the C-108 that was mailed to you on January 24th. The first four wells have been incorporated into this re-submission of the C-108.

A hearing has been scheduled regarding this application for Wednesday, March 6th in Santa Fe, New Mexico. If you should have any questions, please contact us at the letterhead address or call 915/685-1761.

Sincerely,

John Pool
Vice-President

JDP:bj

enclosures

SDX RESOURCES, INC.

P.O. BOX 5061
MIDLAND, TEXAS 79704
(915) 685-1761

January 26, 1996

NMOCD
2040 S. Pacheco
Santa Fe, NM 87505

Re: Application for Authority to Inject
Section 7, T19S, R29E
Eddy Co., New Mexico

Gentlemen:

Enclosed is a copy of Form C-108 (Application for Authority to Inject) for the following wells operated by SDX Resources, Inc.

Conoco 7 State #3
1980' FNL & 542' FWL
Sec 7, T19S, R29E, Unit E

Conoco 7 State #5
2180' FNL & 1740' FWL
Sec 7, T19S, R29E, Unit F

Conoco 7 State #6
660' FNL & 1740' FWL
Sec 7, T19S, R29E, Unit C

Conoco 7 State #7
1980' FNL & 1980' FEL
Sec 7, T19S, R29E, Unit G

Should you have any questions, please contact us at the letterhead address or call 915/685-1761. Thank you for your consideration in this matter.

Sincerely,



John Pool
Vice President

JDP:bj

enclosures

SDX RESOURCES, INC.

P.O. BOX 5061
MIDLAND, TEXAS 79704
(915) 685-1761

January 26, 1996

NMOCD
811 S. First St.
Artesia, NM 88210-2834

Re: Application for Authority to Inject
Section 7, T19S, R29E
Eddy Co., New Mexico

Gentlemen:

Enclosed is a copy of Form C-108 (Application for Authority to Inject) for the following wells operated by SDX Resources, Inc.

Conoco 7 State #3
1980' FNL & 542' FWL
Sec 7, T19S, R29E, Unit E

Conoco 7 State #5
2180' FNL & 1740' FWL
Sec 7, T19S, R29E, Unit F

Conoco 7 State #6
660' FNL & 1740' FWL
Sec 7, T19S, R29E, Unit C

Conoco 7 State #7
1980' FNL & 1980' FEL
Sec 7, T19S, R29E, Unit G

Should you have any questions, please contact us at the letterhead address or call 915/685-1761. Thank you for your consideration in this matter.

Sincerely,



John Pool
Vice President

JDP:bj

enclosures

SDX RESOURCES, INC.

P.O. BOX 5061
MIDLAND, TEXAS 79704
(915) 685-1761

January 24, 1996

ADDRESS

Re: Application for Authority to Inject
Section 7, T19S, R29E
Eddy Co., New Mexico

Gentlemen:

Enclosed is a copy of Form C-108 (Application for Authority to Inject) for the following wells operated by SDX Resources, Inc.

Conoco 7 State #3
1980' FNL & 542' FWL
Sec 7, T19S, R29E, Unit E

Conoco 7 State #5
2180' FNL & 1740' FWL
Sec 7, T19S, R29E, Unit F

Conoco 7 State #6
660' FNL & 1740' FWL
Sec 7, T19S, R29E, Unit C

Conoco 7 State #7
1980' FNL & 1980' FEL
Sec 7, T19S, R29E, Unit G

Should you have any questions, please contact us at the letterhead address or call 915/685-1761. Thank you for your consideration in this matter.

Sincerely,

John Pool
Vice President

JDP:bjja

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SDX RESOURCES, INC.
P.O. BOX 5061
MIDLAND, TEXAS 79704
(915) 685-1761

January 24, 1996

S&J Operating, Co.
PO Box 2249
Wichita Falls, TX 76307

Re: Application for Authority to Inject
Section 7, T19S, R29E
Eddy Co., New Mexico

Gentlemen:

Enclosed is a copy of Form C-108 (Application for Authority to Inject) for the following wells operated by SDX Resources, Inc.

- | | |
|--|---|
| Conoco 7 State #3
1980' FNL & 542' FWL
Sec 7, T19S, R29E, Unit E | Conoco 7 State #5
2180' FNL & 1740' FWL
Sec 7, T19S, R29E, Unit F |
| Conoco 7 State #6
660' FNL & 1740' FWL
Sec 7, T19S, R29E, Unit C | Conoco 7 State #7
1980' FNL & 1980' FEL
Sec 7, T19S, R29E, Unit G |

Should you have any questions, please contact us at the letterhead address or call 915/685-1761. Thank you for your consideration in this matter.

Sincerely,
[Signature]

JDP:bj
enclosures

your RETURN ADDRESS completed on the reverse side?	SENDER: ■ Complete items 1 and/or 2 for additional services. ■ Complete items 3, 4a, and 4b. ■ Print your name and address on the reverse of this form so that we can return this card to you. ■ Attach this form to the front of the mailpiece, or on the back if space does not permit. ■ Write "Return Receipt Requested" on the mailpiece below the article number. ■ The Return Receipt will show to whom the article was delivered and the date delivered.		I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.
	3. Article Addressed to: S&J Operating, Inc. PO Box 2249 Wichita Falls, TX 76307 JAN 20 1996	4a. Article Number P329322131	4b. Service Type <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD
	5. Received By: (Print Name) [Signature]	7. Date of Delivery JAN 20 1996	
	6. Signature: (Addressee or Agent) [Signature]	8. Addressee's Address (Only if requested and fee is paid)	

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SDX RESOURCES, INC.
P.O. BOX 5061
MIDLAND, TEXAS 79704
(915) 685-1761

January 24, 1996

Mitchell Energy
PO Box 4000
The Woodlands, TX 77380-4000

Re: Application for Authority to Inject
Section 7, T19S, R29E
Eddy Co., New Mexico

Gentlemen:

Enclosed is a copy of Form C-108 (Application for Authority to Inject) for the following wells operated by SDX Resources, Inc.

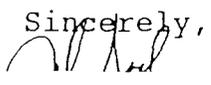
Conoco 7 State #3
1980' FNL & 542' FWL
Sec 7, T19S, R29E, Unit E

Conoco 7 State #5
2180' FNL & 1740' FWL
Sec 7, T19S, R29E, Unit F

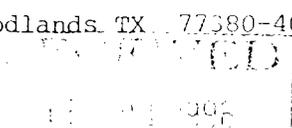
Conoco 7 State #6
660' FNL & 1740' FWL
Sec 7, T19S, R29E, Unit C

Conoco 7 State #7
1980' FNL & 1980' FEL
Sec 7, T19S, R29E, Unit G

Should you have any questions, please contact us at the letterhead address or call 915/685-1761. Thank you for your consideration in this matter.

Sincerely,


JDP:bj
enclosures

RETURN ADDRESS completed on the reverse side?	SENDER: <input type="checkbox"/> Complete items 1 and/or 2 for additional services. <input type="checkbox"/> Complete items 3, 4a, and 4b. <input type="checkbox"/> Print your name and address on the reverse of this form so that we can return this card to you. <input type="checkbox"/> Attach this form to the front of the mailpiece, or on the back if space does not permit. <input type="checkbox"/> Write "Return Receipt Requested" on the mailpiece below the article number. <input type="checkbox"/> The Return Receipt will show to whom the article was delivered and the date delivered.	I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.
	3. Article Addressed to: Mitchell Energy PO Box 4000 The Woodlands, TX 77380-4000 	4a. Article Number P329322133 4b. Service Type <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD
5. Received By: (Print Name) BY:	7. Date of Delivery 30 JAN 96	8. Addressee's Address (Only if requested and fee is paid)
6. Signature (Addressee or Agent)		

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SDX RESOURCES, INC.

P.O. BOX 5061
MIDLAND, TEXAS 79704
(915) 685-1761

January 24, 1996

Heyco
PO Box 1933
Roswell, NM 88202

Re: Application for Authority to Inject
Section 7, T19S, R29E
Eddy Co., New Mexico

Gentlemen:

Enclosed is a copy of Form C-108 (Application for Authority to Inject) for the following wells operated by SDX Resources, Inc.

Conoco 7 State #3
1980' FNL & 542' FWL
Sec 7, T19S, R29E, Unit E

Conoco 7 State #5
2180' FNL & 1740' FWL
Sec 7, T19S, R29E, Unit F

Conoco 7 State #6
660' FNL & 1740' FWL
Sec 7, T19S, R29E, Unit C

Conoco 7 State #7
1980' FNL & 1980' FEL
Sec 7, T19S, R29E, Unit G

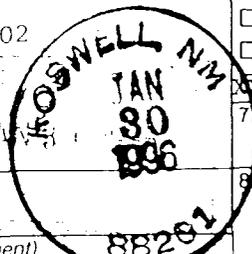
Should you have any questions, please contact us at the letterhead address or call 915/685-1761. Thank you for your consideration in this matter.

Sincerely,
V. M.

JDP:bjac
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bjac 108

RETURN ADDRESS completed on the reverse side?	SENDER:		I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.
	<ul style="list-style-type: none"> ■ Complete items 1 and/or 2 for additional services. ■ Complete items 3, 4a, and 4b. ■ Print your name and address on the reverse of this form so that we can return this card to you. ■ Attach this form to the front of the mailpiece, or on the back if space does not permit. ■ Write "Return Receipt Requested" on the mailpiece below the article number. ■ The Return Receipt will show to whom the article was delivered and the date delivered. 		
3. Article Addressed to:		4a. Article Number	
Heyco PO Box 1933 Roswell NM 88202		2740613359	
		4b. Service Type	
		<input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified	
		<input type="checkbox"/> Express Mail <input type="checkbox"/> Insured	
		<input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD	
5. Received By: (Print Name)		7. Date of Delivery	
		1-30-96	
6. Signature (Addressee or Agent)		8. Addressee's Address (Only if requested and fee is paid)	



Thank you for using Return Receipt Service.

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SDX RESOURCES, INC.

P.O. BOX 5061
MIDLAND, TEXAS 79704
(915) 685-1761

January 24, 1996

Frostman Oil
PO Box 900
Artesia, NM 88211

Re: Application for Authority to Inject
Section 7, T19S, R29E
Eddy Co., New Mexico

Gentlemen:

Enclosed is a copy of Form C-108 (Application for Authority to Inject) for the following wells operated by SDX Resources, Inc.

- | | |
|--|---|
| Conoco 7 State #3
1980' FNL & 542' FWL
Sec 7, T19S, R29E, Unit E | Conoco 7 State #5
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660' FNL & 1740' FWL
Sec 7, T19S, R29E, Unit C | Conoco 7 State #7
1980' FNL & 1980' FEL
Sec 7, T19S, R29E, Unit G |

Should you have any questions, please contact us at the letterhead address or call 915/685-1761. Thank you for your consideration in this matter.

Sincerely,
M.A. 1/24

JDP:bja
enclosures

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RETURN ADDRESS completed on the reverse side?	SENDER:		I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.
	<ul style="list-style-type: none"> ■ Complete items 1 and/or 2 for additional services. ■ Complete items 3, 4a, and 4b. ■ Print your name and address on the reverse of this form so that we can return this card to you. ■ Attach this form to the front of the mailpiece, or on the back if space does not permit. ■ Write "Return Receipt Requested" on the mailpiece below the article number. ■ The Return Receipt will show to whom the article was delivered and the date delivered. 		
	3. Article Addressed to: Frostman Oil PO Box 900 Artesia NM 88211		4a. Article Number 2740613358
5. Received By: (Print Name) <i>Jackie Forster</i>		4b. Service Type <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD	
6. Signature: (Addressee or Agent)		7. Date of Delivery <i>01-30-96</i>	
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Thank you for using Return Receipt Service

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SDX RESOURCES, INC.

P.O. BOX 5061
MIDLAND, TEXAS 79704
(915) 685-1761

January 24, 1996

Conoco, Inc.
10 Desta Dr., #100W
Midland, Texas 79705-4500

Attention: David Scott

Re: Application for Authority to Inject
Section 7, T19S, R29E
Eddy Co., New Mexico

Gentlemen:

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Sec 7, T19S, R29E, Unit C

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1980' FNL & 1980' FEL
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Should you have any questions, please contact us at the letterhead address or call 915/685-1761. Thank you for your consideration in this matter.

Sincerely,


JDP:bj
enclosures

bjac 109

RETURN ADDRESS completed on the reverse side?	SENDER:		I also wish to receive the following services (for an extra fee):
	<ul style="list-style-type: none"> ■ Complete items 1 and/or 2 for additional services. ■ Complete items 3, 4a, and 4b. ■ Print your name and address on the reverse of this form so that we can return this card to you. ■ Attach this form to the front of the mailpiece, or on the back if space does not permit. ■ Write "Return Receipt Requested" on the mailpiece below the article number. ■ The Return Receipt will show to whom the article was delivered and the date delivered. 		
	3. Article Addressed to:		4a. Article Number
	David Scott Conoco, Inc. 10 Desta Dr., #100W Midland TX 79705-4500		Z740613357 4b. Service Type <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD
5. Received By: (Print Name)		7. Date of Delivery	
		5-1-29-96 8. Addressee's Address (Only if requested and fee is paid) JAN 24 1996	
6. Signature: (Addressee or Agent)			

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SDX RESOURCES, INC.
P.O. BOX 5061
MIDLAND, TEXAS 79704
(915) 685-1761

January 24, 1996

Bass Enterprises Production Co.
PO Box 2760
Midland, Texas 79702-2760

Re: Application for Authority to Inject
Section 7, T19S, R29E
Eddy Co., New Mexico

Gentlemen:

Enclosed is a copy of Form C-108 (Application for Authority
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Inc.

Conoco 7 State #3
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letterhead address or call 915/685-1761. Thank you for your
consideration in this matter.

Sincerely,
[Signature]

JDP:bjja
enclosures

bja - 188

RETURN ADDRESS completed on the reverse side?	SENDER:		I also wish to receive the following services (for an extra fee):	
	<ul style="list-style-type: none"> ■ Complete items 1 and/or 2 for additional services. ■ Complete items 3, 4a, and 4b. ■ Print your name and address on the reverse of this form so that we can return this card to you. ■ Attach this form to the front of the mailpiece, or on the back if space does not permit. ■ Write "Return Receipt Requested" on the mailpiece below the article number. ■ The Return Receipt will show to whom the article was delivered and the date delivered. 		1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
	3. Article Addressed to:		4a. Article Number	
	Bass Enterprises Prod. PO Box 2760 Midland TX 79702-2760		Z740613356	
		4b. Service Type		
		<input checked="" type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD		
		7. Date of Delivery		
		8. Addressee's Address (Only if requested and fee is paid)		
5. Received By: (Print Name)		JAN 29 1996 MIDLAND, TX DOWNTOWN USPS		
6. Signature: (Addressee or Agent)		Billie Caldwell JAN 24 1996		