

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
gy, Minerals and Natural Resources Departm

Form C-103  
Revised 1-1-89

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

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

WELL API NO.  
30-015-29352

5. Indicate Type of Lease  
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

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.)

7. Lease Name or Unit Agreement Name

Arco 26A State

8. Well No.

6

9. Pool name or Wildcat  
Red Lake, QN-GR-SA (51300)

1. Type of Well:

OIL  
WELL ☒

GAS  
WELL ☐

OTHER

2. Name of Operator

SDX Resources, Inc.

3. Address of Operator

P. O. Box 5061, Midland, TX 79704

4. Well Location

Unit Letter I : 2310 Feet From The South Line and 330 Feet From The East Line

Section 26

Township

17S

Range

28E

NMPM

Eddy

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
3662' GR

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: Spud, surf csg, & cmt ☐

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.

2/10/97 MIRU United Drlg Co's Rig #4. Spudded 12-1/4" hole 2/10/97.  
Drilled to 530'. Ran 13 jts 8-5/8" 24# J-55 csg, landed @ 507'.  
Cemented w/350 sxs Cl C w/2% CaCl<sub>2</sub>. PD @ 1:30 p.m., 2/11/97.  
TIH & test casing & BOP to 1000 psi for 30 min, OK. Tagged  
TOC 71' w/wireline. Ready Mix to surface. WOC 18 hrs.

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

SIGNATURE

*Janice Courtney*

TITLE

Regulatory Tech

DATE

2/12/97

TYPE OR PRINT NAME

Janice Courtney

915/685-1761  
TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY TIM W. GUM  
DISTRICT II SUPERVISOR

APPROVED BY

TITLE

DATE

FEB 21 1997

CONDITIONS OF APPROVAL, IF ANY: