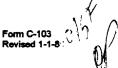
Submit 3 Copies to Appropriate District Office

State of New Mexico Et. /, Minerals and Natural Resources Department



DISTRICT I

CONDITIONS OF APPROVAL, IF ANY:

OIL CONSERVATION DIVISION

Form C-103 Revised 1-1-8:	0
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P.O. Box 1980, Hobbs, NM 88240 2040 Pacheco St.		WELL API NO. 30-015-30001 sindicate Type of Lease		
DISTRICT II P.O. Drawer DD, Artesia, NM 88210				
			sindicate i ype of Lease	STATE FEE
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			∘State Oil & Gas Lease N	
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.)			7Lease Name or Unit Agreement Name Artesia Unit	
¹Type of Well: OIL GAS WELL ☑ WELL □	OTHER			
aName of Operator SDX Resources, Inc.			aWell No. 77	
Address of Operator			sPool name or Wildcat Artesia, QN-GB-SA (03230)	
PO Box 5061, Midland, TX 79704			Artesia, QIV-OD-OA	(03230)
Unit Letter 1734 Feet From The	South	Line and 330	Feet From The	East Line
Section 34 Township		ange 28E	NMPM	Eddy County
	evation (Show whether DF, R 75' GR	KB, RT, GR, etc.		
11 Check Appropriate	Box to Indicate Nat	ure of Notice, Rep	oort, or Other Dat	a
· · · · · · · · · · · · · · · · · · ·			SEQUENT REPO	ORT OF:
PERFORM REMEDIAL WORK	ND ABANDON	REMEDIAL WORK	A	LTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ANBANDONMENT				
PULL OR ALTER CASING		CASING TEST AND CEMENT JOB		
OTHER:		OTHER: TD, run prod	csg & cmt.	X
2Describe Proposed or Completed Operations (Clearly state work) SEE RULE 1103.	all pertinent details, and give	pertinent dates, including es	timated date of starting any	/ proposed
1/26/98 Reach TD of 3125'.				
1/27/98 Run GR, LDT, CNL & DLL from 293' 350 sx Class C Lite. PD 9:10 pm. 0	7' - 300'. Run 79 jts 4-1 Circ 20 sx to pit. Releas	/2" K-55, 10.5 # cs g to e Rig 1-27-98.	3125'. PBTD 3097'.	Cm t w/350 sx Class C +
Presently WO completion.			j for the	
				-
			199 3 FEB	
			RECEIVED	
			OCD - ARTESIA	
I hereby certify that the information above is true and gomple	ete to the best of my knowled	ge and belief.		
SIGNATURE BONNIE (the	_1	Regulatory Tech.		DATE 02-09-98
TYPE OR PRINT NAME Bonnie Atwater			TE	LEPHONE NO. 915/685-1761
(This space for State Use)	43,500			
District is superv			FEB	1 7 1998