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Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION
2040 Pacheco St.
Santa Fe, NM 87505

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

WELL API NO.
30-015-31387

sIndicate Type of Lease

STATE ☒   FEE ☐

6State 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.)

MAY 2002
RECEIVED
OCD - ARTESIA

7Lease Name or Unit Agreement Name
Higner State

1Type of Well:
OIL WELL ☒   GAS WELL ☐   OTHER

8Well No.
1

2Name of Operator
SDX Resources, Inc.   /

3Address of Operator
PO Box 5061, Midland, TX 79704

9Pool name or Wildcat
Artesia, QN / Artesia, GL

4Well Location

Unit Letter __L__ 2310 Feet From The ___South___ Line and ___990___ Feet From The ___West___ Line

Section __28__ Township __17S__ Range __28E__ NMPM __Eddy__ County

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

11 **Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data**

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☒	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ANBANDONMENT ☐
PULL OR ALTER CASING ☐		CASING TEST AND CEMENT JOB ☐	
OTHER: _____ ☐		OTHER: _____ ☐	

12Describe Proposed or Completed Operations (*Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work*) SEE RULE 1103.

9/1/01 -

MIRU. ROH w/rods & pump. Tag sd # 3050'. Bail to RBP @ 3340'.

TIH & catch RBP. TOH & LD plug. TIH w/31' crimped MA on 110 jts 2-7/8" tbg. Bottom of MA @ 3432'. SN @ 3400'. Set 2-1/2" x 2" x 12' RWAC pump. Hang rods & return well to production.

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

SIGNATURE _Bonnie Atwater_   TITLE Regulatory Tech   DATE 05-02-02

TYPE OR PRINT NAME Bonnie Atwater   TELEPHONE NO. 915/685-1761

Accepted for record

(This space for State Use)

MAY 7 2002

APPROVED BY _____   TITLE _____   DATE _____

CONDITIONS OF APPROVAL, IF ANY: