

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

CLSF  
DP

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

RECEIVED

DEC 2 1992

WELL API NO. 30-015-27158
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. E 648-131
7. Lease Name or Unit Agreement Name Artesia Metex Unit
8. Well No. 63
9. Pool name or Wildcat Artesia, C-G-SA
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3561 GL

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.)

1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	2. Name of Operator SDX RESOURCES, INC. ✓
3. Address of Operator P. O. Box 5061 Midland, Texas 79704-5061	4. Well Location Unit Letter G : 1620 Feet From The North Line and 2500 Feet From The East Line Section 25 Township 18-S Range 27-E NMPM Eddy County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3561 GL	

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

10/25/92 Spudded at 3:30 p.m. Drilled 370' of 12-1/4" hole. Ran 364' of 8-5/8" csg. Cemented with 350 sx Class "C" with 2% CACL. Circulated 75 sx cement. Bumped plug at 1:30 a.m., 10/26/92 and pressures tested casing at 1000 PSI for 30 minutes. Held okay. WOC for 18 hours.

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

SIGNATURE Barbara E. Wickham TITLE Production Analyst DATE 10/27/92  
TYPE OR PRINT NAME Barbara E. Wickham TELEPHONE NO. 915-685-1761

(This space for State Use)

ORIGINAL SIGNED BY

APPROVED BY Barbara E. Wickham TITLE Production Analyst DATE 10/27/92

CONDITIONS OF APPROVAL, IF ANY: