Submit 3 Copies to Appropriate District Office

State of New Mexico Minerals and Natural Resources Department Ene

Form C-103	
Revised 1-1-89	

– DATE –

premier i	OH CONCED	LA TELONI DINTECTONI	<i>I</i>				
DISTRICT I P.O. Box 1980, Hobbs, NM 882	AN .	VATION DIVISION . Box 2088	WELL API NO.				
DISTRICT II	Santa Fe New	Mexico 87504-2088	30-015-28994				
P.O. Drawer DD, Artesia, NM 8	8210	5. Indicate Type of Lease STATE X FEE FEE					
DISTRICT III 1000 Rio Brazos Rd., Azzec, NM	87410	6. State Oil & Gas Lease No.					
	Y NOTICES AND REPORTS						
DIFFEREN	FOR PROPOSALS TO DRILL OR TO TRESERVOIR. USE "APPLICATION FORM C-101) FOR SUCH PROPOS	N FOR PERMIT"	7. Lease Name or Unit Agreement Name				
1. Type of Well: OIL G WELL TYN W	VELL OTHER		State 647 AC 711				
2. Name of Operator		22 2 185	8. Well No.				
SDX Resources,	Inc.	2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	130				
3. Address of Operator			9. Pool name or Wildcat				
PO Box 5061, M: Well Location	idland, TX 79704 🔍	<u>a kasa da ya kabasa da C</u>	Artesia, ON-GB-SA				
	: <u>1650</u> Feet From The <u>SC</u>	outh Line and 1280	Feet From The West Line				
Section 27	Township 18S	Range 28E	NMPM Eddy County				
10. Elevation (Show whether DF, RKB, RT, GR, etc.)							
	/////////////						
	<u>/////////////////////////////////////</u>	58' GR					
	/////////////	58' GR ndicate Nature of Notice, I					
	Theck Appropriate Box to I	ndicate Nature of Notice, I	Report, or Other Data				
NOTICE C	Check Appropriate Box to In Internation TO:	ndicate Nature of Notice, I	Report, or Other Data BSEQUENT REPORT OF: ALTERING CASING				
NOTICE C PERFORM REMEDIAL WORK FEMPORARILY ABANDON	Check Appropriate Box to In DF INTENTION TO: PLUG AND ABANDO	ndicate Nature of Notice, I SUE REMEDIAL WORK	Report, or Other Data BSEQUENT REPORT OF: ALTERING CASING G OPNS. PLUG AND ABANDONMENT				
NOTICE OPERFORM REMEDIAL WORK FEMPORARILY ABANDON PULL OR ALTER CASING	Check Appropriate Box to In DF INTENTION TO: PLUG AND ABANDO	ndicate Nature of Notice, I SUE REMEDIAL WORK COMMENCE DRILLIN CASING TEST AND C	Report, or Other Data BSEQUENT REPORT OF: ALTERING CASING G OPNS. PLUG AND ABANDONMENT				
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I hereby certify that the information above is true and complete to the best of my knowledge skinature and complete to the best of my knowledge skinature. Type or print name Janice Courtney	e and belief. THUE REGULATORY TECH.	DATE 6-27-96 TELEPHONE NO. 915/685-176
(This space for State Use) ORIGINAL GRAND BY TIM W. GUM		JUL 1 1996
APPROVED BY DISTRICT HOUSE CANDED	TITLE	DATE - 1000

CONDITIONS OF APPROVAL, IF ANY: