

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.
30-015-02294

Indicate Type of Lease
STATE ☒ FEE ☐

State Oil & Gas Lease No.

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|---|---|
| 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.) | |
| Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | Lease Name or Unit Agreement Name State 648 |
| Name of Operator SDX Resources, Inc. | Well No. 188 |
| Address of Operator PO Box 5061, Midland, TX 79704 | Pool name or Wildcat Millman YT-7R-QN-GB, East |
| Well Location Unit Letter L 1650 Feet From The South Line and 330 Feet From The West Line Section 22 Township 19S Range 28E NMPM Eddy County | |
| Elevation (Show whether DF, RKB, RT, GR, etc.) | |

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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 ANBANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

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.

Current Csg Condition:

8-5/8" @ 220' w/50 sx. TOC calc @ surf
4-1/2" @ 1745' w/75 sx. TOC calc @ 1300'
Perfs: 1710' - 14'

Propose to P&A as follows:

Set CIBP @ 1660' & cap w/ 3" sx cmt. Circ hole w/mud laden fl. Cut & pull 4-1/2" from 1300' if possible.
Spot 25 sx plug 1350' - 1250' - TA9
Spot 35 sx plug 270' - 170' - TA9
Spot 10" sx surface plug.

Install marker & clean location.

Give OCD 24 HRS notice prior to Any Work

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 09-06-01

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

(This space for State Use)

APPROVED BY [Signature] TITLE [Signature] DATE 1/19/01

CONDITIONS OF APPROVAL, IF ANY:

