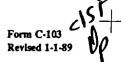
Submit 3 Copies

State of New Mexico



to Appropriate District Office	Energy, r	Minerals and Natural I		Revised 1-1-89	yv	
OIL CONSERVATION DIVISION P.O. Box 1980, Hobbs, NM 88240 P.O. Box 2088CRAVED				WELL API NO. 30-015-27300		
DISTRICT II P.O. Drawer DD, Artesia, NM	88210 Sa	Santa Fe, New Mexico 87504-2088		5. Indicate Type of Lease		
DISTRICT III		APR 0' 9 1993		STA	ATEK FEE	<u> </u>
1000 Rio Brazos Rd., Aztec, N	M 87410			6. State Oil & Gas Lease No. 648		
		REPORTS ON WE				
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"				7. Lease Name or Unit Agreement Name		
1. Type of Well:	(FORM C-101) FOR S	UCH PROPOSALS.)		East Millma	n	
OIL K	GAS WELL	OTHER				
2. Name of Operator	·			8. Well No.	· · · · · · · · · · · · · · · · · · ·	
SDX RESOURCES 3. Address of Operator	s, INC.			9. Pool name or Wildcat		
P. O. BOX 506	1, MIDLAND,	TX 79704		E Millman-Q	-G-SA	
4. Well Location	1220	7.7 L	hoo			
Unit Letter K	_ : 1330 Feet Fro	om The West	Line and 382	Feet From The So	outh	Line
Section 14	Townsh			NMPM EDDY	Cou	ınty
		0. Elevation (Show whether 3426 GR	r DF, RKB, RT, GR, etc.)			
<u>(////////////////////////////////////</u>	Check Appropris	•	Nature of Notice, Ro	enort or Other Data		
	OF INTENTION			SEQUENT REPOF	RT OF:	
				Г ——		
PERFORM REMEDIAL WOR		AND ABANDON	REMEDIAL WORK		NG CASING	
TEMPORARILY ABANDON	☐ CHAN	GE PLANS	COMMENCE DRILLING	OPNS. LX PLUGA	ND ABANDONME	NT L
PULL OR ALTER CASING CASING TEST AND CI				MENT JOB L		
OTHER:			OTHER:	 -		_ L
12. Describe Proposed or Compwork) SEE RULE 1103.	oleted Operations (Clearly	state all pertinent details, o	and give pertinent dates, includ	ling estimated date of starting o	any proposed	
24# cir	culated 30	set at 395′.	Cemented wittested casing	e. Ran 10 jts h 350 sx Class y at 1000 PSI	s "C" and	•
I hereby certify that the information SIONATURE TYPE OR PRINT NAME Barb (This space for State Use)	ara E. Wickl	nam NED BY	d belief. n.e. Prod. Anal	•	THONE NO. 685-	1761
APPROVED BY	MIKE WILLIAM SUPERVISOR.		TLE	DATE	APR 1 4 19	78 3

CONDITIONS OF APPROVAL, IF ANY: