

Submit to Appropriate
District Office
State Lease - 6 copies
Fee Lease - 5 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-101
Revised 1-1-89

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

NOV 18 1993

API NO. (assigned by OCD on New Wells)

30-015-27749

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

V-689

APPLICATION FOR PERMIT TO DRILL, DEEPEN OR PLUG BACK

1a. Type of Work:

DRILL ☒

RE-ENTER ☐

DEEPEN ☐

PLUG BACK ☐

b. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER ☐

SINGLE
ZONE ☐

MULTIPLE
ZONE ☐

7. Lease Name or Unit Agreement Name

Harv State

2. Name of Operator

SDX Resources, Inc.

8. Well No.

1

3. Address of Operator

Post Office Box 5061, Midland, Texas 79704

9. Pool name or Wildcat

Loco Hills-Q-GR-SA, South

4. Well Location

Unit Letter

H

2160

Feet From The

N

Line and

330

Feet From The

E

Line

Section

6

Township

19S

Range

29E

NMPM

Eddy

County

10. Proposed Depth

3000' +/-

11. Formation

Q-GR

12. Rotary or C.T.

Rotary

13. Elevations (Show whether DF, RT, GR, etc.)

3394' Grd.

14. Kind & Status Plug. Bond

Blanket

15. Drilling Contractor

Capstar

16. Approx. Date Work will start

Nov. 26, 1993

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12 1/4"	8 5/8"	24#	350'±	300	Surface
7 7/8"	5 1/2"	15.50#	3000'±/-	300	Surface

Plan to drill a 12 1/4" hole to approximately 350' and set 8 5/8" surface casing. Circulate "C" cement. Drill 7 7/8" hole to TD. Run open hole logs (LDT-CNL-GR and DLL). Run 5 1/2" casing and circulate 50/50 POZ "C" cement. Perforate the Queen-Grayburg and stimulate as necessary for optimum production.

Mud Program: Fresh water mud 0' - 350'.
Salt water mud 350' - TD.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

SIGNATURE Rebecca Robinson TITLE Agent DATE 11-18-93

TYPE OR PRINT NAME Rebecca Robinson TELEPHONE NO. _____

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS

NOV 18 1993

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

APPROVAL VALID FOR 180 DAYS
PERMIT EXPIRES 5-18-94
UNLESS DRILLING UNDERWAY

Submit to Appropriate
District Office
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Fee Lease - 3 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised 1-1-89

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DISTRICT I
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Santa Fe, New Mexico 87504-2088

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P.O. Drawer DD, Artesia, NM 88210

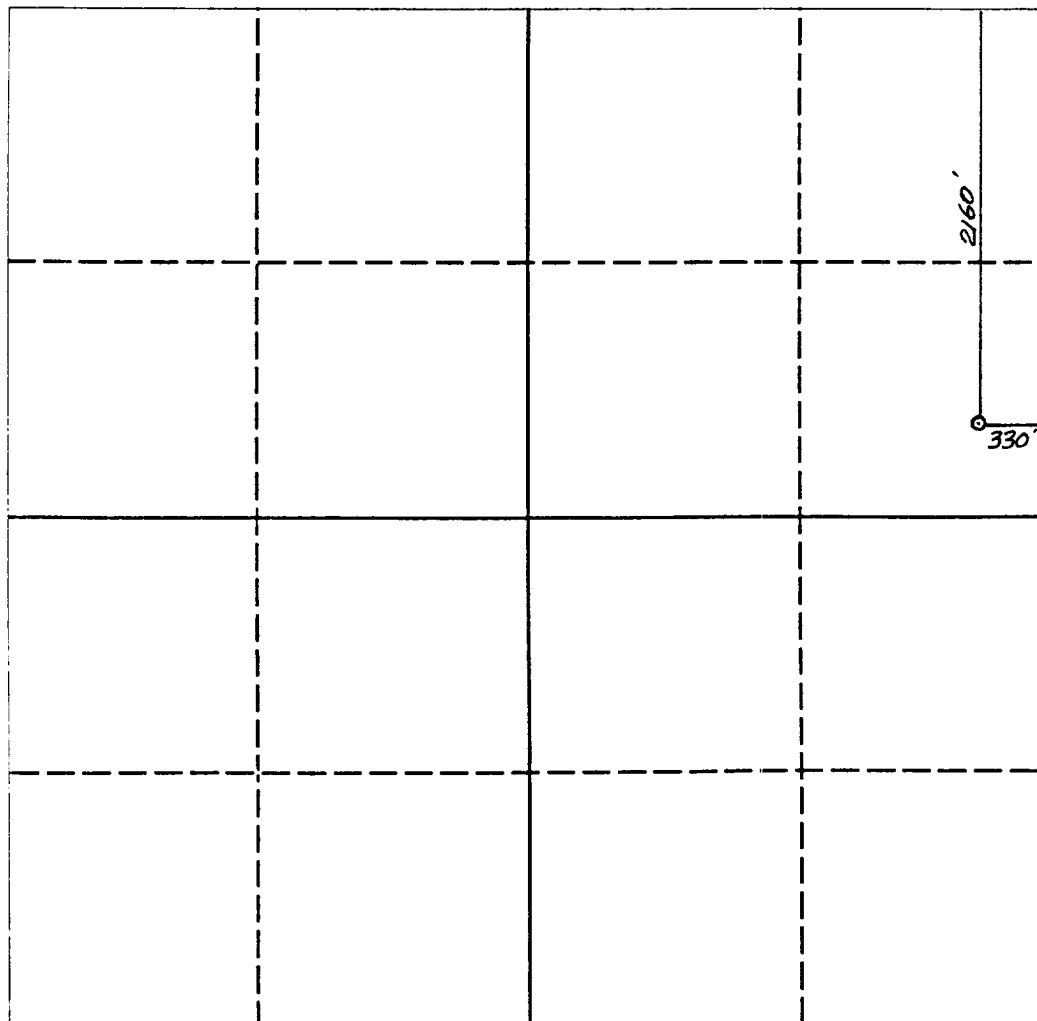
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator SDX RESOURCES, INC.			Lease HARV STATE			Well No. 1		
Unit Letter H	Section 6	Township 19 SOUTH	Range 29 EAST	County EDDY COUNTY, NM				
Actual Footage Location of Well: 2160 feet from the NORTH line and 330 feet from the EAST line								
Ground level Elev. 3394.	Producing Formation Queen-Grayburg		Pool Loco Hills-Q-GR-SA			Dedicated Acreage: 40 Acres		

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.?
☐ Yes ☐ No If answer is "yes" type of consolidation _____
If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary).
No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.



OPERATOR CERTIFICATION

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

Signature *Chuck Morgan*
Printed Name **Chuck Morgan**
Position **Engineer**
Company **SDX Resources, Inc.**
Date **November 18, 1993**

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed **NOVEMBER 17, 1993**
Signature of Surveyor *[Signature]*
Professional Surveyor
NEW MEXICO
5412
REGISTERED PROFESSIONAL ENGINEER
NM REPT-NO 12

0 330 660 990 1320 1650 1980 2310 2640 2000 1500 1000 500 0