

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
En , Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

WELL API NO.
020451

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Conoco 7 State

8. Well No.
16

9. Pool name or Wildcat
Millman QN-GR-SA, East (46555)

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 ☒ GAS WELL ☐ OTHER

2. Name of Operator
SDX Resources, Inc.

3. Address of Operator
P. O. Box 5061, Midland, TX 79704

4. Well Location
Unit Letter G : 2500 Feet From The North Line and 2630 Feet From The East Line

Section 7 Township 19S Range 29E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3376'

11. 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 ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: 5-1/2" csg & cmt job ☒

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.

12/21/96 Drilled 7-7/8" hole to 3000' TD. Run 93 jts 5-1/2" 14# J55 casing and set @ 2999' RU D/S and cmted w/600 sxs 65/35 Poz (lead) and 250 sxs C1 C (tail) w/2% CaCl. PD @ 4:03 p.m., 12/21/96. Circ 112 sxs to surface. Set slips & pack off wellhead. Released United Drilling Co's Rig 4 @ 5:00 p.m. (MST), 12/21/96. WOC.

DEC 30 '96

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

SIGNATURE Jancie Courtney TITLE Regulatory Tech DATE 12/27/96
TYPE OR PRINT NAME Jancie Courtney TELEPHONE NO. 915/685-1761

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE JAN 2 1997

CONDITIONS OF APPROVAL, IF ANY: