CONDITIONS OF APPROVAL, IF ANY:

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

<u>DISTRICT I</u> P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATIO	NOISION	WELL API NO.	
	2040 Pacheco St. Santa Fe, NM 87	<b>7505</b>	30-015-29886	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	// 57	3 To 1 To	sIndicate Type of Lea	
<u>DISTRICT III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	\(\frac{\partial}{\partial}\)	7 (199) S	₅State Oil & Gas Lea	
(DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVO	ES AND REPORTS ON WELDSALS TO DRILL OR TO DEEPEN OIR. USE "APPLICATION FOR PER 11) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A 📆	<sup>7</sup> Lease Name or Uni Conoco 7 State	
¹Type of Well: OL GAS WELL ☑ WELL ☐	OTHER			
Name of Operator SDX Resources, Inc.			aWell No. 25	
sAddress of Operator PO Box 5061, Midland, TX 79704			₃Pool name or Wildo Millman Yates, 7F	at R-QN-GB-SA, East (46555)
4Well Location Unit Letter A : 1310 Fe	eet From The North	Line and330	Feet From The	East Line
Section 7	Township 19S F	Range 29E	NMPM	Eddy County
	<sup>10</sup> Elevation (Show whether DF, I 3371' GR	RKB, RT, GR, etc.)		
Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data				
NOTICE OF INTENTION TO: SUBS			SEQUENT RE	PORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OF	PNS.	PLUG AND ANBANDONMENT
PULL OR ALTER CASING		CASING TEST AND CEME	NT JOB	
OTHER:		OTHER:		
12Describe Proposed or Completed Operations (4 work) SEE RULE 1103.	Clearly state all pertinent details, and give	pertinent dates, including est	timated date of starting	any proposed
Spud 12-1/4" hole @ 9:00 a.m. MST 12-3-97. Drill to 485'. RU csg crew & run 10 jts 8-5/8", 24#, J-55 csg to 361'. RU Dowell & cmt w/350 sx Class C w/2% CaCl2 + 1/4# per sx D29. PD 10:30 am 12-5-97. RD Dowell. WOC 18 hrs.				
Start drig 7-7/8" hole.	20.11 D 10.00 U.M 12 0 01.110	20110111 11 20 10 11101		
-				
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE DONNIE (	theater 11	Regulatory Technic	ian	DATE 12-09-97
TYPE OR PRINT NAME Bonnie Atwater				TELEPHONE NO. 915/685-1761
(This space for State Use)			<del> </del>	