Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-	103
Revised	1-1-8

<u>DISTRICT I</u> P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

2040 Pacheco St. Santa Fe, NM 87505

WELL API NO.	20 041
30-025 -29885	29886

DISTRICT II Santa Fe, NM 87505			30-025-24588				
P.O. Drawer DD, Artesia, NM 88210					sIndicate Type of Leas	STATE	
<u>DISTRICT III</u> 1000 Rio Brazos Rd., Aztec, NM 874	110				هState Oil & Gas Lease		FEE
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.)				Lease Name or Unit Agreement Name Conco 7 State			
Type of Well: OIL GAS WELL WELL	. 🗆	OTHER					
² Name of Operator SDX Resources, Inc.					₃Well No. 25		
Address of Operator PO Box 5061, Midland, TX	79704				₃Pool name or Wildcat Millman Yates 7F		(46555)
Well Location Unit Letter A :	1310 Feet From The	North	Line and	330	Feet From The _	East	Line
Section	7 Township	198	Range	29E	NMPM	Eddy	County
	3371	ation (<i>Show whether t</i> 'GR	DF, RKB, RT, GR, et	c.)			
Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data							
	NE INTENTION T		1	•	EOLIENT DE		

PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING

TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ANBANDONMENT CASING TEST AND CEMENT JOB

OTHER: OTHER: Reach TD & set production csg.

12Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Reached TD of 2860' 12/10/97. Run 72 jts 4-1/2" K-55, 11.6# csg. Set @ 2859'. PBTD 2820'. Cmt w/500 sx 35/65 POZ w/CaCl2 & 1/4# D29 + 350 sx Class C w/D59, CaCl2 & 1/4# D29. PD @ 4:36 pm 12/10/97. Circ 24 sx to pit.

Released rig 5:00 pm 12/10/97.

Presently waiting on completion.

RECEIVEL OCD ARTESIA

I hereby certify that the information above is true and complete to the best of my k	-c 05 67			
SIGNATURE Bonnie atuater	TITLE Regulatory Tech.	DATE 12-12-97		
TYPE OR PRINT NAME Bonnie Atwater		TELEPHONE NO. 915/685-1761		
(This space for State Use)				
APPROVED BY DESCRIPTION OF SUPERVISION	TITLE	DATE 1EC 2 2 1997		

CONDITIONS OF APPROVAL, IF ANY: