

DISTRICT I
P.O. Box 1900, Hobbs, NM 88240

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawing DD, Artesia, NM 88210

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

WELL API NO. 30-025-03196
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FBE <input type="checkbox"/>
6. State Oil & Gas Lease No. E-5837
7. Lease Name or Unit Agreement Name Northeast Pearl Queen Unit
8. Well No. 18
9. Pool name or Wildcat Pearl (Queen)

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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Injection
2. Name of Operator SDX Resources
3. Address of Operator P.O. Box 5061 Midland, Tx 79702
4. Well Location Unit Letter L : 2310 Feet From The South Line and 330 Feet From The West Line Section 23 Township 19-S Range 35-E NMPM Lea County
10. Elevations (Show whether DP, RKB, RT, GR, etc.)

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	OASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

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.

Set CIBP @ 4850' - 35' cement on top.
Perf. @ 1800' - squeeze 50 sxs @ 1800' - 1700'.
Perf. W 185' - squeeze 50 sxs - leave casing full.

THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE BEGINNING OF PLUGGING OPERATIONS FOR THE C-103 TO BE APPROVED.

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

SIGNATURE Rickey Smith TITLE Agent DATE 9-28-93
TELEPHONE NO. 915-586-3076

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE **OCT 01 1993**

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

SEP 30 1993

JOE HOBBS
OFFICE