

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

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-015-31066
Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
State Oil & Gas Lease No.

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.)	
Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	Lease Name or Unit Agreement Name Marathon 26 State
Name of Operator SDX Resources, Inc. /	
Address of Operator PO Box 5061, Midland, TX 79704 915/685-1761	
Well No. 4	
Pool name or Wildcat Red Lake, QN-GB-SA (51300)	
Well Location Unit Letter <u>G</u> <u>2235</u> Feet From The <u>North</u> Line and <u>2310</u> Feet From The <u>East</u> Line Section <u>26</u> Township <u>17S</u> Range <u>28E</u> NMPM <u>Eddy</u> County	
Elevation (Show whether DF, RKB, RT, GR, etc.) 3665	

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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 ANBANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

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.

Spud 12-1/4" hole 8/14/00. Drill to 481'. Run 10 jts 8-5/8" 23# csg & set @ 408'. Cmt w/350 sx CI C. Cmt @ surf. WOC total of 19-1/2 hrs.

Drill 7-7/8" hole to 3515' TD. Reached TD 9:00 am 8/21/00. Run 12 jts 5-1/2" K-55, LT&C & 23 jts 5-1/2", K-55, 14# ST&C csg, set @ 3512'. Cmt w/400 sx 35/65 POZ + 350 sx CI C. Did not circ.

Release Rig 9:00 pm 8/21/00.



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

SIGNATURE Bonnie Atwater TITLE Regulatory Tech DATE 01-26-01

TYPE OR PRINT NAME Bonnie Atwater TELEPHONE NO. 915/685-1761

(This space for State Use)

ORIGINAL SIGNED BY TIM W. GUN
DISTRICT II SUPERVISOR

APPROVED BY B60 TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

JAN 31 2001