

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
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

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO.
30-015-31543

Indicate Type of Lease

STATE ☒

FEE ☐

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.)

Lease Name or Unit Agreement Name
Win 29 State

Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER

Name of Operator
SDX Resources, Inc.

Well No.
1

Address of Operator
PO Box 5061, Midland, TX 79704

Pool name or Wildcat
Undes, Millman YT-7R-QN, East

Well Location

Unit Letter P 330 Feet From The South Line and 990 Feet From The East Line

Section 29 Township 19S Range 28E NMPM Eddy County

Elevation (Show whether DF, RKB, RT, GR, etc.)
3367' GR

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 ANBANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: TA ☒

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.

2/14/02 - TOH w/rods & tbq.

2/15/02 - TIH w/CIBP & set @ 2232' w/35' cmt on top. TIH w/5-1/2" CIBP & set @ 1430'. TIH w/tbg to 1420'. Roll csg w/2% KCL & test to 580# for 30 min w/chart. Test witnessed by Ward Hawkins w/OCD. TOH. Install 5-1/2" collar swage & valve. Clean location.

Chart attached

Well TA

Temporary Abandon Status
Approved Until

2-15-03

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 03-04-02

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

(This space for State Use)

APPROVED BY [Signature] TITLE Wild App ID DATE MAR 6 2002

CONDITIONS OF APPROVAL, IF ANY:



