Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103	
District I	Energy, Minerals and Natural Resources		WELL API NO.	May 27, 2004
1625 N. French Dr., Hobbs, NM 88240 District II	OH CONCERNATION		WELL API NO.	30-025-09631
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type o	
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE [FEE 🔽
District IV	Santa Fe, NM 87505		6. State Oil & Gas	
1220 S. St. Francis Dr., Santa Fe, NM 87505			14156	0
SUNDRY NOT	7. Lease Name or	Unit Agreement Name		
(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			Cooper le	d Unit
ROPOSALS.)		Cooper Jal Unit 8. Well Number 120 w		
1. Type of Well: Oil Well	Gas Well Other X Injector		9. OGRID Numbe	
2. Name of Operator	SDG Resources L. P.		9. OGKID Numbe	er 193003
3. Address of Operator	P. O. Box 1390		10. Pool name or	Wildcat JALMAT:
	Montrose, CO 81402			-Rivers; LANGLIE
			MATTIX: 7-River	S
4. Well Location				
Unit LetterC_	:660feet from theNORTH	line and19	980feet from t	heWESTline
Section 24	Township 24S	Range 36E	NMPM I	LEA County
	11. Elevation (Show whether DR		No. 3	E. C. Britan
Pit or Below-grade Tank Application	or Closure	R		
		aterwell >1000 feet. Di	istance from nearest si	urface water >1000 feet
Pit type_DIRT_Depth to Groundwater_130 feet_Distance from nearest fresh water well_>1000 feet_Distance from nearest surface water_>1000 feet Pit Liner Thickness: 12 mil Below-Grade Tank: Volume200bbls; Construction MaterialSynthetic				
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK				ALTERING CASING ☐
TEMPORARILY ABANDON	.	COMMENCE DRIL		P AND A
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	JOB 📙	
OTHER:		OTHER: Cleaned	out injector w/coil to	ubing and Acidized. 🛛
13. 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. For Multiple Completions: Attach wellbore diagram of proposed completion				
or recompletion.				
Objective: Cleaned out injector w/Coiled Tubing and Acidized with 4,000 gallons 15% NEFE HCl acid.				
3	Ç			
1. MIRU Coiled Tubing Unit.				sqqqq
2. RIH 1 ¼" Perf-Clean Tool on		.4	* *	O3V LOW
 Energized Tool and cleaned o Acidized Perfs 3,011'-3,516' 	ut Perfs 3,011'-3,516' with surfactar with 4,000 gallons 15% NEFE HCl	nt water.	!	Establish Y
5. POOH with coiled tubing and		icia.		*
6. RD Coiled Tubing Unit.				
7. Placed well on injection at 24		4		
8. Maximum permitted injection	pressure is 600 psig.	(and the second
I haraby cartify that the information	n above is true and complete to the h	ect of my knowledge	and baliaf I furthe	n contife that any nit on balany
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan.				
And Control of the state of the				
SIGNATURE LEMINGU CANYOU TITLE Senior Petroleum Engineer DATE 03/17/05				
Type or print name E-mail address: Domingo@sdgresources.com Telephone No. 432-580-8500				
For State Use Only				
APPROVED BY: Haw W. Wand OFFELD REPRESENTATIVE II/STAFF MANAGER DATE				
Conditions of Approval (if and):				
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