Submit 3 Copies to Appropriate District Office

## State of New Mexico

to Appropriate District Office	En , Minerals and N	latural Resources Departmen	Form C-103 Revised 1-1-89	
DISTRICT I P.O. Box 1980, Hobbs, NM 88240		ATION DIVISION Box 2088	WELL API NO.	
DISTRICT II		Mexico 87504-2088	30-025-33463	
P.O. Drawer DD, Artesia, NM 88210	bunta 1 0, 110W 1	VICAGO 07504-2000	5. Indicate Type of Lease	
DISTRICT III			STATEXX FEE	
1000 Rio Brazos Rd., Aztec, NM 8741	O		6. State Oil & Gas Lease No.	
CUMPRALA	TIOTO AND DEBORTO		E-7262	
( DO NOT USE THIS FORM FOR F DIFFERENT RES (FORM	OTICES AND REPORTS ( PROPOSALS TO DRILL OR TO SERVOIR. USE "APPLICATION (C-101) FOR SUCH PROPOSA	DEEPEN OR PLUG BACK TO A FOR PERMIT	7. Lease Name or Unit Agreement Name	
I. Type of Well:			NorthEast Pearl Queen Unit	
MEIT XX MEIT [	OTHER			
2. Name of Operator			8. Well No.	
SDX Resources, Inc.			24	
3. Address of Operator	or		9. Pool name or Wildcat	
PO Box 5061, Midlan	d TX 79704		Pearl; ON	
4. Well Location			1 I Carry Oli	
Unit Letter F : 23	10 Feet From The Nort	h Line and 1500	Feet From The Line	
Section 23	Township 19S	Range 35E	NMPM Lea County	
	10. Elevation (Show	whether DF, RKB, RT, GR, etc.)		
		3768' GR		
11. Check	Appropriate Box to Inc	licate Nature of Notice, Re	eport, or Other Data	
NOTICE OF IN	NTENTION TO:	SUB	SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. PLUG AND ABANDONMENT	
PULL OR ALTER CASING		-  -	CASING TEST AND CEMENT JOB	
OTHER:			OTHER: TD & set production csq.	
12. Describe Proposed or Completed Open	sations (Clearly state all pertinent a		ing estimated date of starting any proposed	
work) SEE RULE 1103.			any proposes	
7-1-96 Reached TD of	5100'. Ran LDT-CNL	-GR-DLL logs.		
7 2 06 Page 121 day 5	1/04 15 5 • 6#	G. 1 6 51001 G. 1	/250 50/50 50-	
		Set @ 5100'. Cmtd w		
		950 sx). PD 12:30 p.		
Release rig @	2:30 p.m. 6-2-96.	WOC. Presently WO co	ompletion.	
I hereby certify that the information above is m	se and complete to the best of my knowl	odge and belief.		
SIGNATURE Janice	ourtney	mue Regulatory T	Tech. 7-3-96	
0		mile	DATE 7 3 30	

I necessity certain that the information above is true and complete to the best of my know	riedge and belief.	
SIGNATURE Ganice Courtney	mmz Regulatory Tech.	рате 7-3-96
TYPEOR PRINT NAME Janice Courtney		TELEPHONE NO. 915/685-17
(This space for State Use)		
ORIGINAL SURANDI SUI SU SUSSIMO		111 10 400
APPROVED BY BURNING THE BURNING A STATE OF A	— mle ——————————————————————————————————	DATE 1 0 1996

CONDITIONS OF APPROVAL, IF ANY: