

District I
PO Box 1980, Hobbs, NM 88241-1980

District II
811 South First, Artesia, NM 88210

District III
1000 Rio Brazos Rd., Aztec, NM 87410

District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-104
Revised October 18, 1994

Instructions on back
Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

| | | |
|--|---|--|
| ¹ Operator name and Address Melrose Operating Co. P.O. Box 5061 Midland, Texas 79704 (915) 685-1761 | | ² OGRID Number 184860 |
| | | ³ Reason for Filing Code Change of Operator 12-01-99 |
| ⁴ API Number 30-025-08569 | ⁵ Pool Name Galimat (T-9-7R) | ⁶ Pool Code 33820 |
| ⁷ Property Code 25191 | ⁸ Property Name Galimat Field Gates 3d Unit | ⁹ Well Number 102 |

II. ¹⁰ Surface Location

| | | | | | | | | | |
|------------------------|------------------|---------------------|------------------|---------|--------------------------|---------------------------|--------------------------|-------------------------|-------------------|
| Ul or lot no. P | Section 3 | Township 22S | Range 35E | Lot Idn | Feet from the 330 | North/South Line S | Feet from the 330 | East/West line E | County Lea |
|------------------------|------------------|---------------------|------------------|---------|--------------------------|---------------------------|--------------------------|-------------------------|-------------------|

¹¹ Bottom Hole Location

| | | | | | | | | | |
|---------------------------------|--|-----------------------------------|-------|-----------------------------------|---------------|------------------------------------|---------------|-------------------------------------|--------|
| Ul or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South Line | Feet from the | East/West line | County |
| | | | | | | | | | |
| ¹² Lse Code S | ¹³ Producing Method Code Inj | ¹⁴ Gas Connection Date | | ¹⁵ C-129 Permit Number | | ¹⁶ C-129 Effective Date | | ¹⁷ C-129 Expiration Date | |

III. Oil and Gas Transporters

| | | | | |
|---------------------------------|--|-------------------|-------------------|--|
| ¹⁸ Transporter OGRID | ¹⁹ Transporter Name and Address | ²⁰ POD | ²¹ O/G | ²² POD ULSTR Location and Description |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

IV. Produced Water

| | |
|-------------------|--|
| ²³ POD | ²⁴ POD ULSTR Location and Description |
| | |

V. Well Completion Data

| | | | | | |
|-------------------------|------------------------------------|-------------------------|--------------------|----------------------------|---------------------------|
| ²⁵ Spud Date | ²⁶ Ready Date | ²⁷ TD | ²⁸ PBTD | ²⁹ Perforations | ³⁰ DHC, DC, MC |
| | | | | | |
| ³¹ Hole Size | ³² Casing & Tubing Size | ³³ Depth Set | | ³⁴ Sacks Cement | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

VI. Well Test Data

| | | | | | |
|----------------------------|---------------------------------|-------------------------|---------------------------|-----------------------------|-----------------------------|
| ³⁵ Date New Oil | ³⁶ Gas Delivery Date | ³⁷ Test Date | ³⁸ Test Length | ³⁹ Tbg. Pressure | ⁴⁰ Csg. Pressure |
| | | | | | |
| ⁴¹ Choke Size | ⁴² Oil | ⁴³ Water | ⁴⁴ Gas | ⁴⁵ AOF | ⁴⁶ Test Method |
| | | | | | |

⁴⁷ I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Michael Conjay*
Printed name: Michael Conjay

Title: Vice President

Date: 12/27/99

Phone:

Approved by:

Title:

Approval Date:

OIL CONSERVATION DIVISION

⁴⁸ If this is a change of operator fill in the OGRID number and name of the previous operator

SDX Resources, Inc.

020451

Previous Operator Signature

Printed Name

Title

Date

John Pool

Vice President

12/27/99

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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

| | | |
|---|---|-----------------------------|
| Operator SDX Resources Inc. | | Well API No. 30002508569 |
| Address P. O. Box 5061, Midland, Texas 79704 | | |
| Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain) | | |
| New Well <input type="checkbox"/> | Change in Transporter of: | |
| Recompletion <input type="checkbox"/> | Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> | Effective - 09-01-93 |
| Change in Operator <input checked="" type="checkbox"/> | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> | |
| If change of operator give name and address of previous operator Smith & Mars, Inc, P. O. Box 863, Kermit, Texas 79745 | | |

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|-----------------|--|---|---------------------|
| Lease Name Jalmat Field Yates Sand | Well No. 102 | Pool Name, Including Formation Jalmat Tansil Yates SR | Kind of Lease State, Federal or Fee State | Lease No. E-8322 |
| Location Unit Letter <u>P</u> : <u>330</u> Feet From The <u>South</u> Line and <u>330</u> Feet From The <u>East</u> Line Section <u>3</u> Township <u>22S</u> Range <u>35E</u> , NMPM, <u>Lea</u> County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | |
|---|---|------------------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas New Mexico Pipeline Co. | Address (Give address to which approved copy of this form is to be sent) P. O. Box 2528, Hobbs, NM 88241 | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> GPM Gas Corporation | Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, TX 79761 | |
| If well produces oil or liquids, give location of tanks. | Unit P | Sec. 3 |
| | Twp. 22S | Rge. 35E |
| | Is gas actually connected? YES | When? Unknown |

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

| | | | | | | | | |
|-------------------------------------|-----------------------------|----------|-----------------|----------|--------|-------------------|------------|------------|
| Designate Type of Completion - (X) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v | Diff Res'v |
| Date Spudded | Date Compl. Ready to Prod. | | Total Depth | | | P.B.T.D. | | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | | Top Oil/Gas Pay | | | Tubing Depth | | |
| Perforations | | | | | | Depth Casing Shoe | | |
| TUBING, CASING AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | | SACKS CEMENT | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

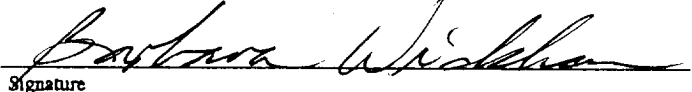
| | | | |
|--------------------------------|-----------------|---|------------|
| Date First New Oil Run To Tank | Date of Test | Producing Method (Flow, pump, gas lift, etc.) | |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| Actual Prod. During Test | Oil - Bbls. | Water - Bbls. | Gas- MCF |

GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test - MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pilot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.


Signature
Barbara Wickham Prod. Analysis
Printed Name Title
10-15-93 915-685-1761
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved OCT 27 1993

By
ORIGINAL SIGNED BY JERRY SEXTON
Title DISTRICT I SUPERVISOR

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.