

**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**  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.	30-025-08591
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	E-8322
7. Lease Name or Unit Agreement Name	Jalmat Field Yates Sand Uni
8. Well No.	112
9. Pool name or Wildcat	Jalmat Tansill Yates 7 Rvrs.

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)	
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Injection Well	
2. Name of Operator SDX Resources, Inc.	
3. Address of Operator P. O. Box 5061, Midland, TX. 79704	
4. Well Location Unit Letter <u>L</u> : <u>990</u> Feet From The <u>West</u> Line and <u>1980'</u> Feet From The <u>South</u> Line Section <u>11</u> Township <u>22S</u> Range <u>35E</u> NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) GR 3607'	

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 ABANDONMENT ☐  
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.

9/3/96 MIRU DA&S. Opened well & bled 2" flowline.  
9/4/96 Opened well & started hauling water.  
9/5/96 ND Wellhead, unset pkr. POOH w/tbg & pkr. Found hole @ 24th jt above pkr. RU & tested in hole w/pkr & tbg. Replaced bad jts of tbg w/2-3/8" @ top to 3833'. Circ pkr fluid. Set pkr & test pkr & csg to 300 psi for 15 min, OK.  
9/6/96 NU wellhead & resumed injec. RD & MO unit. Chart attached.

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

SIGNATURE Janice Courtney TITLE Regulatory Tech DATE 10/02/96  
TYPE OR PRINT NAME Janice Courtney TELEPHONE NO. 915/685-1761

(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

**OCT 07 1996**



