District I

PO Box 1980, Hobbs, NM 88241-1980

811 South First, Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico

Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION 2040 South Pacheco

Form C-104 Revised October 18, 1994

Instructions on back Submit to Appropriate District Office

5 Copies Santa Fe, NM 87505 District IV □ AMENDED REPORT 2040 South Pacheco, Santa Fe, NM 87505 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT ¹ Operator name and Address ² OGRID Number Melrose Operating Co. P.O. Box 5061 ³ Reason for Filing Code Midland, Texas 79704 Change of Operator 12-01-99 (915) 685-1761 ⁴ API Number ⁵ Pool Name ⁶ Pool Code 30-025-08593 Jalmat-Tansill Yates Seven Rivers 33820 ⁷ Property Code ⁸ Property Name 9 Well Number Jalmat Field Yates Sand Unit ¹⁰ Surface Location Ul or lot no. Section Range Lot Idn Feet from the North/South Line East/West line County 980 ¹¹ Bottom Hole Location Ul or lot no. Section Township Lot Idn Feet from the Feet from the East/West line Range North/South Line County 12 Lse Code ¹³ Producing Method Code 14 Gas Connection Date ¹⁵ C-129 Permit Number 16 C-129 Effective Date ¹⁷ C-129 Expiration Date Oil and Gas Transporters 18 Transporter OGRID 19 Transporter Name 20 POD 21 O/G ²² POD ULSTR Location and Address and Description Navajo Refining Co 015694 P₄O. Box 159 \mathbb{C} Artesia, New Mexico 88210 Feagan Gathering Co. OO 7802 2276530 P.O. Box 50307 ₹9710 Midland, Texas IV. Produced Water ²⁴ POD ULSTR Location and Description Well Completion Data ²⁶ Ready Date 25 Spud 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 44 Gas 43 Water 45 AOF 6 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. OIL CONSERVATION DIVISION Approved by: Muchal Printed name: Michael Corjay Title

48 If this is a change of operator fill in the OGRID number and name of the previous operator SDX Resources, Inc.

Phone:

Previous Operator Signature

Title:

Vice President

020451

John Pool

Printed Name

Approval Date:

Vice President

Title

3 5 XCON

· Bin

Date

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

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

1.		TO TRA	ANSP	ORT O	IL AND NA	ATURAL G	AS			
Operator CDV Decrease								II API No.		
Address SDA RESOURCES	SDX Resources Inc.					30002508593				
								· · · · · · · · · · · · · · · · ·		
P. O. Box 506 Reason(s) for Filing (Check proper box)	1, M10	lland,	Te:	xas 79						
New Well		Change in	Tmam	order of	Ot	her (Please exp	lain)			
Recompletion	Oil	Cuange in	Dry G			Eff	ectiv	e - 09-	01 0))
Change in Operator	Casinghea	ad Gas 🗍	Conde					C - 05-	01-5	, 3
If change of operator give name and address of previous operator Sm			Tn	C P	O Do	060 **				
II. DESCRIPTION OF WELL	ANDIE	ACE			-U-BOX	_863,_K	ermit	. Texas	797	45
Lease Name	AND DE		Pool N	Jame Inchy	ling Formation					
Jalmat Field Yates							d of Lease State State	e ,	Lease No. E = 8322	
Unit LetterF	: 1980	0	Feet Fr	rom The N	orth Lin	e and16	550	Feet From The	Ма	a+
Section 11 Townsh	ip 22	S	Range	35 <u>E</u>		мрм,	Lea	con tom the		StLin_ County
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	SPORTE	R OF OI	LAN	D NATU	RAL GAS	Wa	100	Inici	-1	2001
Traine of Authorized Transporter of Oil	$\overline{\mathbf{x}}$	or Condens	sate		Address (Giv	address to wi	hich approve	d copy of this f	orm is to	be sens)
Texas New Mexi Name of Authorized Transporter of Carra	CO PID ghead Gas		CO.		$P \sim 0$	_Box 2	528. 1	Hobber 1	O MIM	0 2 4 1
GPM Gas Corpor			- 13	7	4001	= uuuress 10 W		d copy of this fo		
If well produces oil or liquids,	Unit	Soc.	Twp.	Rea	Is gas actually	Penbr	OOK.	dessa.	<u>TX</u>	79761
give location of tanks.	F	11	228	1 35E	VI	20	/\ "\\\		~	
If this production is commingled with that IV. COMPLETION DATA	from any other	er lease or p	ool, giv	e comming	ling order num	ber:		Unknow	1	
Designate Type of Completion	- (20)	Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back	Same R	es'v Diff Res'v
Date Spudded		l Ready to	Drnd.	··	Total Depth	L	<u></u>		<u> </u>	i
·	Date Compl. Ready to Prod.				Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas I	Pay		Tubing Depth		
Perforations	L				<u> </u>			Depth Casing	Shoe	
									,	
LIOUE OUTE					CEMENTIN	D				
HOLE SIZE CASING & TUBING S			IZE	DEPTH SET			S	SACKS CEMENT		
										
										
								 		
. TEST DATA AND REQUES	T FOR A	LLOWA	BLE	·				<u> </u>		
OIL WELL (Test must be after re				il and must	be equal to or	exceed top allo	wable for th	ie dansk om ka f	6.U na	
Date First New Oil Run To Tank	Date of Test	<u>-</u>			Producing Me	thod (Flow, pur	πρ, gas lift,	eic.)	<i>н</i> јшт 24	nours.)
ength of Test	Tables D		· · · · · · · · · · · · · · · · · · ·		<u> </u>					
	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		
esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size			
I. OPERATOR CERTIFICA	ATE OF	COMPI	ΤΔ ΝΙ	CE				<u> </u>		
I hereby certify that the rules and regular Division have been complied with and the	tions of the O	il Conserva	tion		С	IL CON	SERV	ATION E	VIVIS	NOI
is true and complete to the best of my ki	nowledge and	belief.	,		Data	Approved	00	27 199	13	
1-1-	///			_	Date	Approved		136	<u></u>	
Sidney Ark	Nes	upa			By_					
Signature Barbara Wickham	Dr	od. Ar	naly	ei.	Dy	ORIGINA	Al Signir	D DV 12-		
Printed Name		T	īlle -		Title_	D	ISTRICT!	D BY JERRY Superviso	SEXT	DN
10-15-93 Date	91	5-685- Teleph	-176 one No.		'''''			24: FV A12C	16	

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.