

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.
30-025-08610

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
1223-1

SUNDRY NOTICES AND REPORTS ON WELLS
(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.)

7. Lease Name or Unit Agreement Name

Cone Jalmat Yates Pool Unit

8. Well No.
11

9. Pool name or Wildcat
Jalmat, Tansill-Yates-7 Rvs.

1. Type of Well:
OIL WELL ☐ GAS WELL ☐ OTHER ☐ 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 P : 660 Feet From The South Line and 660 Feet From The East Line
Section 13 Township 22-S Range 35-E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3587 GR

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.

Well spudded 3/57. TD 3921', PBTD 3896'. 5-1/2" casing set 3921' w/530 sxs cmt. 8-5/8" surface csg set @ 299' & cmted w/150 sxs, circulated. Converted to injector well under Administrative Order WFX No. 180, dated 9/22/64. Tubing ran open ended to 3707', SN @ 3706'. Perfs: 3647-3862. Packer @ 3696'. Sttd injection 8/16/66.

Prep to repair hole in 2-3/8" tubing. Test tubing and notify OCD in time to witness test. Prep to start work 9/17/96

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 9/16/96
TYPE OR PRINT NAME Janice Courtney TELEPHONE NO. 915/685-1761

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE SEP 26 1996

CONDITIONS OF APPROVAL, IF ANY:

