

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 - 08654	⁵ Pool Name Jalmat-Tansill Yates Seven Rivers	
⁶ Pool Code 33820		
⁷ Property Code 25203	⁸ Property Name Cone Jalmat Yates Pool Unit <i>Int</i>	⁹ Well Number 605

II. ¹⁰ Surface Location

UI or lot no. <i>F</i>	Section <i>24</i>	Township <i>22S</i>	Range <i>35E</i>	Lot Idn	Feet from the <i>1980</i>	North/South Line <i>South</i>	Feet from the <i>990</i>	East/West line <i>East</i>	County <i>Lea</i>
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¹¹ Bottom Hole Location

UI or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
¹² Lse Code <i>S</i>	¹³ Producing Method Code <i>P</i>		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
015694	Navajo Refining Co. P.O. Box 159 Artesia, New Mexico 88210	<i>2246410</i> <i>227640</i>	<i>0</i>	
<i>007802</i>	Feagan Gathering Co. P.O. Box 50307 Midland, Texas 79710	<i>2276430</i> <i>2276530</i>	<i>6</i>	

IV. Produced Water

²³ POD 2276450	²⁴ POD ULSTR Location and Description
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V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	²⁷ TD	²⁸ PBTB	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 Gorjay*
Printed name: Michael Gorjay
Title: Vice President

Date: *12/21/99* Phone:

OIL CONSERVATION DIVISION

Approved by: *CRICK*

Title: *CRICK*

Approval Date: *JAN 06 2000*

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

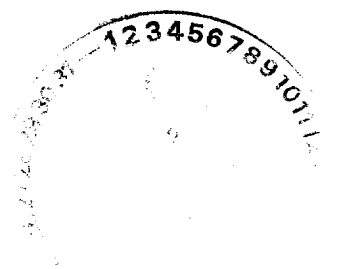
Title

Date

John Pool

Vice President

12/21/99



OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator SDX Resources Inc.	Well API No. 3002508654
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"/>
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Effective - 09-01-93	
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 Cone Jalmat Yates Pool Unit Tr. 6	Well No. 5	Pool Name, Including Formation Jalmat Tansil Yates SR	Kind of Lease State, Federal or Fee State	Lease No. E-396
Location Unit Letter I : 1980 Feet From The South Line and 990 Feet From The East Line Section 24 Township 22S Range 35E , NMPM, Lea 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 I	Sec. 24
	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
Printed Name
Date 10-15-93
Prod. Analysis
Title
Telephone No. 915-685-1761

OIL CONSERVATION DIVISION

Date Approved OCT 27 1993

By ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

Title

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.