

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

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.)	
1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	WELL API NO. 30-025-33155
2. Name of Operator SDX RESOURCES, INC.	5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
3. Address of Operator P. O. BOX 5061 MIDLAND, TX 79704	6. State Oil & Gas Lease No. E-1357
4. Well Location Unit Letter A : 10 Feet From The North Line and 330 Feet From The East Line Section 25 Township 22S Range 35E NMPM Lea County	7. Lease Name or Unit Agreement Name Cone Jalmat Yates Pool Unit
10. Elevation (Show whether DF, RKB, RT, GR, etc.) GR 3565	8. Well No. 42
	9. Pool name or Wildcat Jalmat Tansill Yates-7 Rivers

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: REQUEST EXTENSION OF EXPIRATION ☒
DATE OF APD

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.

SDX Resources, Inc. respectfully request an extension for the drilling of the
Cone Jalmat Yates Pool Unit #42. NSL 3581

By extending the expiration of this APD it will give SDX Resources, Inc.
additional time to complete their drilling program within the next six months
for this area.

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

TYPE OR PRINT NAME Janice Courtney

DATE 2/08/96

TELEPHONE NO. (915) 685-1761

(This space for State Use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY

TITLE

DATE

Expires Oct 24, 1996

FEB 14 1996