

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. 30-025-33527
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.

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
Jalmat Field Yates Sand Unit

8. Well No. 166

9. Pool name or Wildcat
Jalmat; Tansill-Yates-7 Rvrs

1. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator
SDX Resources, Inc.

3. Address of Operator
P. O. Box 5061, Midland, TX 79704

4. Well Location
Unit Letter E : 2553 Feet From The North Line and 330 Feet From The West Line

Section 12 Township 22S Range 35E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
GR 3583'

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: Spud and surf casing <input checked="" type="checkbox"/>

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.

9/8/96 MIRU Rod Ric Drlg Co's Rig #4. Spudded 12-1/4" hole at 12:00 MN, 9/8/96. Run 10 jts 3-5/8" J-55 24# csg, land off @ 442'. Cemented w/325 sxs Class "C" w/ 2% CaCl. Circulated 63 sxs to surface. PD @ 8:30 a.m. (MST) 9/09/96. WOC. Test BOP's to 1000 psi for 30 min, OK.

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 9/10/96
TYPE OR PRINT NAME Janice Courtney TELEPHONE NO. 915/685-1761

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE **SEP 17 1996**

CONDITIONS OF APPROVAL, IF ANY:

SEP 17 1964
U.S. DEPT. OF AGRICULTURE
WASHINGTON, D.C.