

District I - (505) 393-6161
1625 N. French Dr
Hobbs, NM 88241-1980
District II - (505) 748-1283
811 S. First
Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Road
Aztec, NM 87410
District IV - (505) 827-7131

New Mexico
Energy Minerals and Natural Resources Department
Oil Conservation Division
2040 South Pacheco Street
Santa Fe, New Mexico 87505
(505) 827-7131

Form C-140
Revised 06/99

SUBMIT ORIGINAL
PLUS 2 COPIES
TO APPROPRIATE
DISTRICT OFFICE

APPLICATION FOR
WELL WORKOVER PROJECT

I. Operator and Well

Operator name & address SDX Resources, Inc. P. O. Box 5061, Midland, TX 79704						GRID Number 020451		
Contact Party Charles M. Morgan						Phone 915-685-1761		
Property Name Exxon Fee				Well Number #1		API Number 30-025-33439		
UL G	Section 4	Township 21S	Range 37E	Feet From The 1911	North/South Line North	Feet From The 1980	East/West Line East	County Lea

II. Workover

Date Workover Commenced: August 17, 1998	Previous Producing Pool(s) (Prior to Workover): 19190 - Drinkard
Date Workover Completed: August 19, 1998	

- III. Attach a description of the Workover Procedures performed to increase production.
IV. Attach a production decline curve or table showing at least twelve months of production prior to the workover and at least three months of production following the workover reflecting a positive production increase.

V. AFFIDAVIT:

State of TEXAS)
) ss.
County of Midland)
John Pool, being first duly sworn, upon oath states:
1. I am the Operator, or authorized representative of the Operator, of the above-referenced Well.
2. I have made, or caused to be made, a diligent search of the production records reasonably available for this Well.
3. To the best of my knowledge, this application and the data used to prepare the production curve and/or table for this Well are complete and accurate.

Signature [Signature] Title Vice President Date July 22, 1999
SUBSCRIBED AND SWORN TO before me this 22nd day of July, 1999.
[Signature]
Notary Public
My Commission expires: 7-26-01

FOR OIL CONSERVATION DIVISION USE ONLY:

VI. CERTIFICATION OF APPROVAL:

This Application is hereby approved and the above-referenced well is designated a Well Workover Project and the Division hereby verifies the data shows a positive production increase. By copy hereof, the Division notifies the Secretary of the Taxation and Revenue Department of this Approval and certifies that this Well Workover Project was completed on 8-19-1999.

Signature District Supervisor <u>[Signature]</u>	OCD District <u>1</u>	Date <u>7/26/99</u>
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VII. DATE OF NOTIFICATION TO THE SECRETARY OF THE TAXATION AND REVENUE DEPARTMENT: _____

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