

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division
P.O. Box 1980
Hobbs, NM 88241

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

| | |
|----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|
| 1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other | 5. Lease Designation and Serial No. LC-030132 B |
| 2. Name of Operator SDX Resources, Inc. | 6. If Indian, Allottee or Tribe Name NA |
| 3. Address and Telephone No. PO Box 5061, Midland, TX 79704 915/685-1761 | 7. If Unit or CA, Agreement Designation NA |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 660' FSL, 1980' FWL Sec 30, T22S, R36E | 8. Well Name and No. Clossen B #19 |
| | 9. API Well No. 30-025-2525242 |
| | 10. Field and Pool, or Exploratory Area Jalmat Yates |
| | 11. County or Parish, State Lea Co., NM |

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION |
|-------------------------------------------------------|--------------------------------------------------------------|
| <input type="checkbox"/> Notice of Intent | <input type="checkbox"/> Abandonment |
| <input checked="" type="checkbox"/> Subsequent Report | <input type="checkbox"/> Recompletion |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Plugging Back |
| | <input type="checkbox"/> Casing Repair |
| | <input type="checkbox"/> Altering Casing |
| | <input checked="" type="checkbox"/> Other TA status extended |
| | <input type="checkbox"/> Change of Plans |
| | <input type="checkbox"/> New Construction |
| | <input type="checkbox"/> Non-Routine Fracturing |
| | <input type="checkbox"/> Water Shut-Off |
| | <input type="checkbox"/> Conversion to Injection |
| | <input type="checkbox"/> Dispose Water |

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

SDX Resources, Inc. took over operations of this effective October 1, 1996.

We hereby request a one (1) year extension on the TA status of this well to study and update well status.

APPROVED FOR 12 MONTH PERIOD
ENDING 10/8/97

14. I hereby certify that the foregoing is true and correct

Signed Bonnie Atwater Title Regulatory Asst. Date 10/1/96

(This space for Federal or State office use)

Approved (ORIG. SGD.) ALEXIS C. SWOBODA Title PETROLEUM ENGINEER Date 10/8/96

Conditions of approval, if any:

SEE ATTACHED 501
CONDITIONS OF APPROVAL

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.