

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE\*

(See other instructions on reverse side)

FORM APPROVED  
OMB NO. 1004-0137  
Expires: February 28, 19955. LEASE DESIGNATION AND SERIAL NO.  
LC 032451 C

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME, WELL NO.

A. H. Meyers A #5

9. API WELL NO.

30-025-09603

10. FIELD AND POOL, OR WILDCAT

Jai Cooper SWD: Seven Rivers

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

Sec. 22, T24S, R36E  
Unit Ltr B12. COUNTY OR PARISH  
Lea13. STATE  
NM

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☐ Other INJECTION

b. TYPE OF COMPLETION:

NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ Re-Entry ☒ DIFF. GENVR. ☐ Other

2. NAME OF OPERATOR

SDX Resources, Inc.

3. ADDRESS AND TELEPHONE NO.

P. O. Box 5061, Midland, TX 79704 915/685-1761

4. LOCATION OF WELL (Report location clearly and in accordance with instructions on reverse side)

At surface 660' FNL &amp; 1980' FEL

At top prod. interval reported below

At total depth Same

14. PERMIT NO.

DATE ISSUED

BLM  
ROSWELL, NM

15. DATE SPUDDED

16. DATE T.D. REACHED

17. DATE COMPL. (Ready to prod.)

18. ELEVATIONS (DF, RKB, RT, OR, ETC.)\*

19. ELEV. CASINGHEAD

2/27/97(re-entry)

4/02/97

4/02/97

GR 3340'

20. TOTAL DEPTH, MD &amp; TVD

3800'

21. PLUG, BACK T.D., MD &amp; TVD

3645'

22. IF MULTIPLE COMPL., HOW MANY\*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\*

Injection well— Open Hole 3590-3645 (M.D.) 7-Rivers

25. WAS DIRECTIONAL SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

NONE

27. WAS WELL CORED

No

28. CASING RECORD (Report all strings set in well)

CASING SIZE/GRADE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	TOP OF CEMENT, CEMENTING RECORD	AMOUNT PULLED
13"	NA	238'	NA	150 SXS	None
9-5/8"	NA	3086'	NA	775 SXS	None
7"	NA	3527'	NA	150 SXS	None
4-1/2"	15.10#, P118	3483.8'		700 SXS Lite+200 sxs C1	C (circ to surf)

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)
None				

30. TUBING RECORD

SIZE	DEPTH SET (MD)	PACKER SET (MD)
2-3/8"	3433"	3433"

31. PERFORATION RECORD (Interval, size and number)

No previous perf records available  
Drilled open hole from 3590-3645'  
Test witnessed & chart submitted to OCD/  
Hobbs on 4/2/97.

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

33. PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Producing or shut-in)
INJECTION WELL		WO Pump
		4/2/97 S.I. WO Flowline

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

35. LIST OF ATTACHMENTS

None

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

Janice Courtney

TITLE

Regulatory Tech

DATE

4/17/97

\*(See Instructions and Spaces for Additional Data on Reverse Side)

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.

38. GEOLOGIC MARKERS

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
			NOT AVAILABLE			

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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 type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <u>Injection Well</u>	5. Lease Designation and Serial No. <u>LC 032451 C</u>
2. Name of Operator <u>SDX Resources, Inc.</u>	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. <u>P. O. Box 5061, Midland, TX 79704 915/685-1761</u>	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) <u>660' FNL &amp; 1980' FEL, Unit Ltr B</u> <u>Sec. 22, T24S, R36E</u>	8. Well Name and No. <u>A. H. Meyers A #5</u>
	9. API Well No. <u>30-025-09603</u>
	10. Field and Pool, or Exploratory Area <u>Jal Cooper SWD: Seven Rivers</u>
	11. County or Parish, State <u>Lea Co., NM</u>

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 <u>Notification of injection</u>
	<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

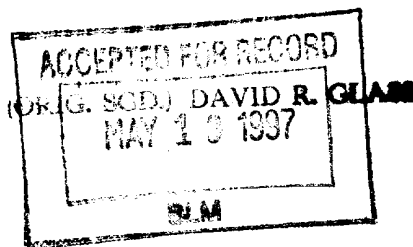
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)\*

Started injection on the A. H. Meyers A #5 on May 1, 1997 at a rate of 200 BW/Day.

Injecting thru open hole interval 3590-3645', Seven Rivers formation.

SWD-653



RECEIVED  
MAY -8 P 4 29  
BUREAU OF LAND MGMT.  
ROSWEIL OFFICE

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

Signed <u>James Courtney</u>	Title <u>Regulatory Tech</u>	Date <u>5/5/97</u>
(This space for Federal or State office use)		
Approved by _____	Title _____	Date _____
Conditions of approval, if any: _____		

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\*See Instruction on Reverse Side

