

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<br><input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other     | 5. Lease Designation and Serial No.<br>LC-070397                 |
| 2. Name of Operator<br>Xeric Oil & Gas Corporation   | 6. If Indian, Allottee or Tribe Name                             |
| 3. Address and Telephone No.<br>PO Box 352   Midland, Texas   79702  | 7. If Unit or CA, Agreement Designation<br>West Pearl Queen Unit |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)<br>Unit G, 1980' FNL & 1980' FEL<br>Sec. 29, T-19S, 35E, NMPM | 8. Well Name and No.<br>WPQU #111                                |
|  | 9. API Well No.  |
|  | 10. Field and Pool, or Exploratory Area<br>Pearl (Queen)         |
|  | 11. County or Parish, State<br>Lea Co., NM                       |

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

| TYPE OF SUBMISSION                                   | TYPE OF ACTION  |
|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Abandonment                                  |
| <input 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>Return to Production</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.)\*

Xeric Oil & Gas Corp. requests a 90 day time period to return well to production.

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

Signed Eddie Medley Title Production Manager Date 5/1/98

(This space for Federal or State office use)  
Approved by (CRIG. SGD.) GARY GOURLEY Title PETROLEUM ENGINEER Date MAY 08 1998  
Conditions of approval, if any: