

(June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil & Gas Division
1625 N. French Dr.
Hobbs, NM 88240

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

5. Well Designation and Serial No. NM-0349792
6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE

1. Type of Well
 Oil Well Gas Well Other Injector

2. Name of Operator
 XERIC OIL & GAS CORPORATION

3. Address and Telephone No.
 P. O. Box 352, Midland, TX 79702 (915)683-3171

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
 Section 3, T20S, R35E
 2331.7 FNL & 1650 FWL

7. If Unit or CA, Agreement Designation

8. Well Name and No.
 South Pearl Queen #7

9. API Well No.
 30-025-03316

10. Field and Pool, or Exploratory Area
 Pearl Queen

11. County or Parish, State
 Lea

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 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 MIT
	<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

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.)*

A MIT was performed on this well 2/20/02. The casing was pressured to 500 PSI over a 30 minute period. The test was deemed successful. The chart is attached.

ACCEPTED FOR RECORD
AUG 1 2002
GARY G. JAMES

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

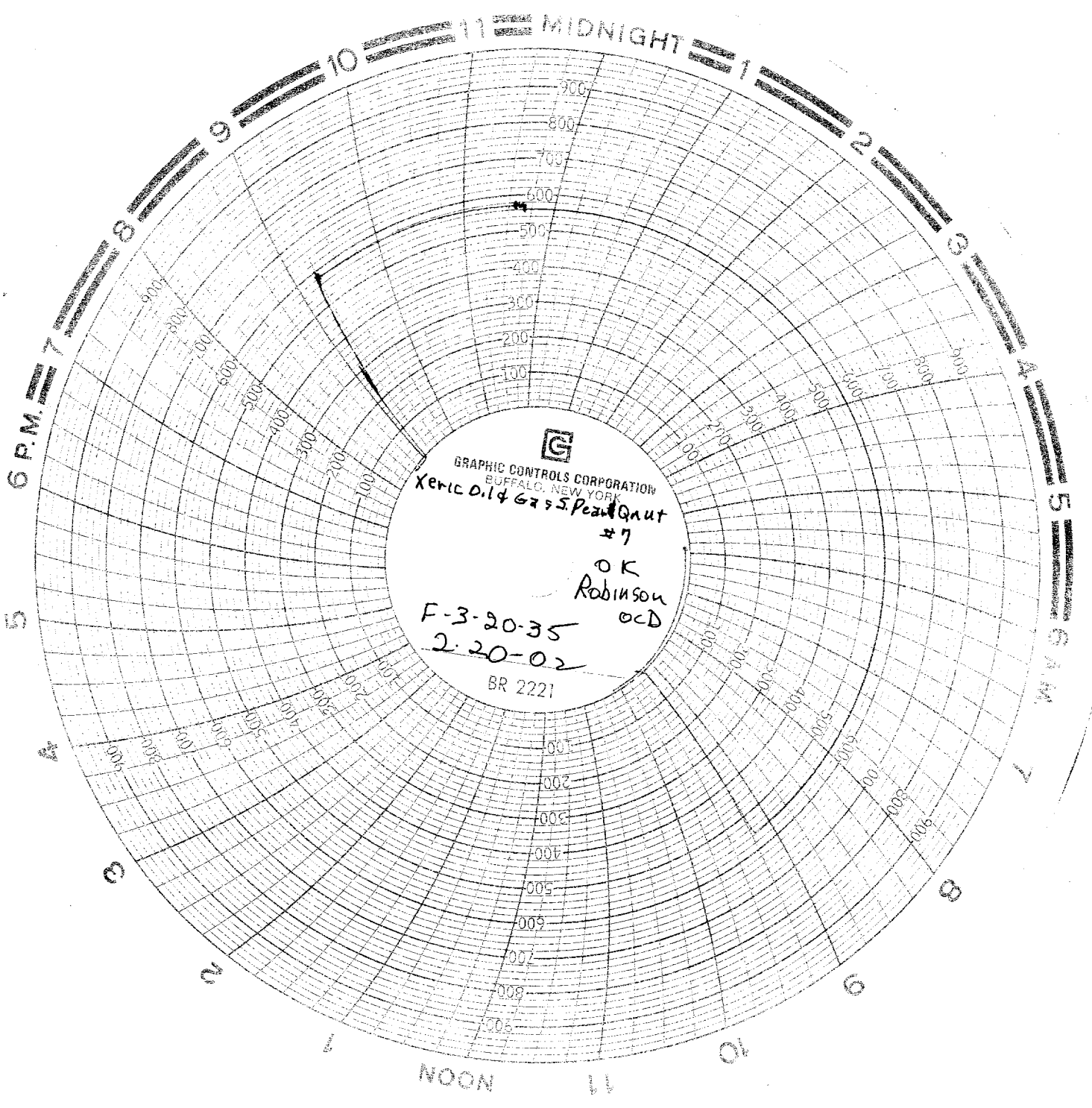
Signed *Angie Crawford* Title Production Analyst Date 7/26/02

(This space for Federal or State office use)
Approved by *Larry W. Wink* Title _____ Date _____
Conditions of approval, if any:

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.

GW W

*See instruction on Reverse Side



GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK
XERIC D. 14 67 5 S. Pearl Qnut
#7
OK Robinson
F-3-20-35 ocd
2-20-02
BR 2221