

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Artesia, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 August 1, 2011

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

RECEIVED OCD
 2013 MAY 21 P 2:10

WELL API NO. 30-025-30862
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name West Peral Queen Unit
8. Well Number 193
9. OGRID Number 25482
10. Pool name or Wildcat Pearl Queen

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well Gas Well Other

2. Name of Operator
State of New Mexico formerly Xeric O & G

3. Address of Operator
1625 N. French Drive, Hobbs, NM 88240

4. Well Location
 Unit Letter N : 100 feet from the South line and 2580 feet from the West line
 Section 28 Township 19-S Range 35-E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

05/17/13 MIRu plugging equipment.
05/20/13 POH w/ rods. NU BOP. POH w/ tbg.
05/21/13 RIH w/ gauge ring to 4570'. RIH and set CIBP @ 4570'. Pressured up on casing to 500 psi. Held. Circulated hole w/ mud laden fluid. Spot 25 sx cement @ 4570-4323. POH to 3400'. Spot 25 sx cement @ 3400-3153. POH to 1800'. Spot 25 sx cement @ 1800-1553. POH to 465'. Spot 50 sx cement @ 465-20'. Top off plug @ 20' to surface.
05/22/13 rigged down plugging equipment and moved off. Moved in welder and helper. Dug out cellar. Cut off wellhead. Welded on Above Ground Dry Hole Marker. Back filled cellar. Removed dead men. Cleaned location and moved off.

Spud Date: 5/17/13

Rig Release Date: 5/22/13

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE *Bern Montgomery* TITLE Agent for State of NM DATE 5-28-13
 Type or print name Bern Montgomery E-mail address: bern@bernandassociates.com PHONE: 432-580-7161
For State Use Only
 APPROVED BY: *[Signature]* TITLE Dist Mgr DATE 5-29-2013
 Conditions of Approval (if any):