

# OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL APT. NO.	30-025-03262
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	E-1638
7. Lease Name or Unit Agreement Name	West Pearl Queen Unit
8. Well No.	134
9. Pool name or Wildcat	Pearl Queen

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Artesia, NM 87410

**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 Injection

2. Name of Operator  
 Pyramid Energy, Inc.

3. Address of Operator  
 10101 Reunion Place San Antonio, TX 78216

4. Well Location  
 Unit Letter B : 660 Foot From The North Line and 1980 Foot From The East Line  
 Section 31 Township 19S Range 35E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
3731' GL

11. 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"/>	REMEDIAL WORK <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: <u>5 yr. Mechanical Integrity Test on T.A. Wellbore</u> <input checked="" type="checkbox"/>

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

5/7/94 Ran Mechanical Integrity on temporarily abandoned wellbore as per NMOCD Rules and Regulations. Pressured casing to 300 psi, casing held. Pressure chart is attached.

This Approval of Temporary Abandonment Expires 5-1-99

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

SIGNATURE Scott Graef TITLE Operations Manager DATE 05/10/94

TYPE OR PRINT NAME Scott Graef TELEPHONE NO. (210) 308-8000

ORIGINAL SIGNED BY JERRY SEXTON  
 DISTRICT SUPERVISOR

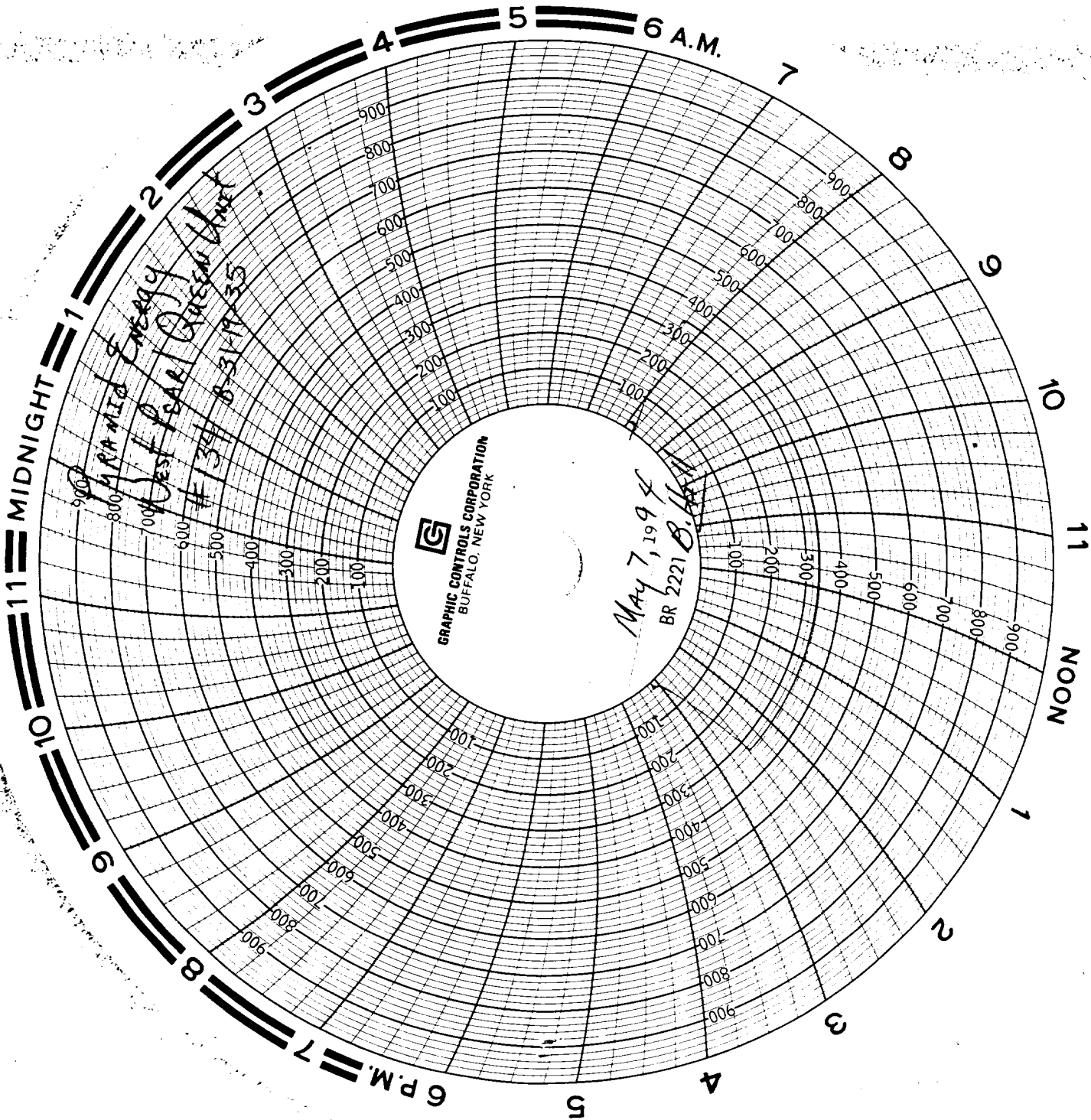
APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE 5/10/94

CONDITIONS OF APPROVAL, IF ANY:

10/10/10  
10/10/10  
10/10/10

**RECEIVED**

**USDHHS  
OFFICE**



  
GRAPHIC CONTROLS CORPORATION  
BUFFALO, NEW YORK

May 7, 1944  
BR 22212 B. H. H.

PARMID ENERGY  
West Pearl Green Unit  
# 134 B-31735