

OCD Exhibit No. E  
Inactive Well Additional Financial Assurance Report

25482 XERIC OIL & GAS CORP

Total Well Count: 110

Printed On: Wednesday, September 03 2008

Property	Well Name	Lease Type	ULSTR	OCD Unit Letter	API	Well Type	Last Prod/Inj	Inactive Additional Bond Due	Measured Depth	Required Bond Amount	Bond Required Now	Bond In Place	In Violation
33175	CROSBY DEEP #001	F	N-28-25S-37E	N	30-025-23891	O	06/1998		10946			0	
	CROSBY DEEP #002	P	G-33-25S-37E	G	30-025-24287	O	10/2001	11/01/2003	10445	15445	Y	0	Y
	CROSBY DEEP #003	F	J-33-25S-37E	J	30-025-11870	O	02/1979		10155			0	
	CROSBY DEEP #004	P	C-33-25S-37E	C	30-025-25985	O	12/2005	01/01/2008	8894	13894	Y	0	Y
15432	EAST PEARL QUEEN UNIT #001	P	B-22-19S-35E	B	30-025-03189	I	12/1992	01/01/1995	4811	9811	Y	0	Y
	EAST PEARL QUEEN UNIT #004	P	E-22-19S-35E	E	30-025-03186	O	12/1992	01/01/1995	4910	9910	Y	0	Y
	EAST PEARL QUEEN UNIT #007	P	J-22-19S-35E	J	30-025-03183	I	11/1990	12/01/1992	4910	9910	Y	0	Y
	EAST PEARL QUEEN UNIT #008	P	K-22-19S-35E	K	30-025-03182	O	04/1990	05/01/1992	4912	9912	Y	0	Y
	EAST PEARL QUEEN UNIT #009	P	L-22-19S-35E	L	30-025-03185	I	12/1992	01/01/1995	4880	9880	Y	0	Y
	EAST PEARL QUEEN UNIT #011	P	N-21-19S-35E	N	30-025-03175	I	12/1992	01/01/1995	4960	9960	Y	0	Y
	EAST PEARL QUEEN UNIT #012	P	O-21-19S-35E	O	30-025-03174	O	12/1992	01/01/1995	4950	9950	Y	0	Y
	EAST PEARL QUEEN UNIT #014	P	M-22-19S-35E	M	30-025-03184	O	12/1989	01/01/1992	5002	10002	Y	0	Y
	EAST PEARL QUEEN UNIT #015	P	N-22-19S-35E	N	30-025-03181	I	12/1992	01/01/1995	4900	9900	Y	0	Y
	EAST PEARL QUEEN UNIT #016	P	O-22-19S-35E	O	30-025-03180	O	07/1986	08/01/1988	5483	10483	Y	0	Y
	EAST PEARL QUEEN UNIT #018	P	B-27-19S-35E	B	30-025-03216	I	12/1992	01/01/1995	4895	9895	Y	0	Y
	EAST PEARL QUEEN UNIT #021	P	A-28-19S-35E	A	30-025-03237	O	12/1992	01/01/1995	4940	9940	Y	0	Y
	EAST PEARL QUEEN UNIT #022	P	B-28-19S-35E	B	30-025-03235	I	12/1992	01/01/1995	4925	9925	Y	0	Y
	EAST PEARL QUEEN UNIT #023	P	G-28-19S-35E	G	30-025-03236	I	12/1992	01/01/1995	49559	54559	Y	0	Y
	EAST PEARL QUEEN UNIT #026	S	F-27-19S-35E	F	30-025-03222	I	05/1990	06/01/1992	4880	9880	Y	0	Y
	EAST PEARL QUEEN UNIT #027	P	G-27-19S-35E	G	30-025-12578	O	07/2008	08/01/2010	13950	18950		0	
	EAST PEARL QUEEN UNIT #028	P	H-27-19S-35E	H	30-025-03215	I	12/1992	01/01/1995	4949	9949	Y	0	Y
	EAST PEARL QUEEN UNIT #029	P	L-26-19S-35E	L	30-025-03208	I	06/2002	07/01/2004	4915	9915	Y	0	Y
	EAST PEARL QUEEN UNIT #030	P	I-27-19S-35E	I	30-025-03213	O	12/1989	01/01/1992	4900	9900	Y	0	Y
	EAST PEARL QUEEN UNIT #036	S	N-27-19S-35E	N	30-025-03221	I	12/2003	01/01/2006	5032	10032	Y	0	Y
	EAST PEARL QUEEN UNIT #037	P	O-27-19S-35E	O	30-025-03219	O	12/1992	01/01/1995	4950	9950	Y	0	Y
	EAST PEARL QUEEN UNIT #039	P	A-34-19S-35E	A	30-025-03295	O	04/1990	05/01/1992	5000	10000	Y	0	Y
	EAST PEARL QUEEN UNIT #042	S	D-34-19S-35E	D	30-025-03298	I	02/1994	03/01/1996	5048	10048	Y	0	Y
	EAST PEARL QUEEN UNIT #046	S	H-34-19S-35E	H	30-025-03302	I	12/1992	01/01/1995	4986	9986	Y	0	Y
	EAST PEARL QUEEN UNIT #056	S	F-34-19S-35E	F	30-025-23302	O	12/1992	01/01/1995	5050	10050	Y	0	Y
	EAST PEARL QUEEN UNIT #057	S	K-34-19S-35E	K	30-025-23409	O	12/1992	01/01/1995	4991	9991	Y	0	Y
	EAST PEARL QUEEN UNIT #059	P	H-27-19S-35E	H	30-025-23427	O	12/1992	01/01/1995	4882	9882	Y	0	Y
	EAST PEARL QUEEN UNIT #077	S	I-28-19S-35E	I	30-025-31106	O	01/2005	02/01/2007	5025	10025	Y	0	Y
	EAST PEARL QUEEN UNIT #082	S	K-27-19S-35E	K	30-025-31121	O	07/2008	08/01/2010	5056	10056		0	
	EAST PEARL QUEEN UNIT #084	S	M-27-19S-35E	M	30-025-30869	O	02/2006	03/01/2008	5150	10150	Y	0	Y
	EAST PEARL QUEEN UNIT #089	S	D-34-19S-35E	D	30-025-31019	O	07/2008	08/01/2010	5085	10085		0	
19072	GREGORY A #005	F	I-33-25S-37E	I	30-025-11884	S	11/2005		3266			0	
	GREGORY A #007	F	N-33-25S-37E	N	30-025-11867	O	11/2005		3299			0	
	GREGORY A #008	F	I-33-25S-37E	I	30-025-29539	G	07/2008		3535			0	
19073	GREGORY C #001	F	C-33-25S-37E	C	30-025-11865	O	11/2005		3238			0	
33176	GREGORY EL PASO FEDERAL #001	F	O-33-25S-37E	O	30-025-20491	G	07/2008		8461			0	
	GREGORY EL PASO FEDERAL #004	F	K-33-25S-37E	K	30-025-11871	S	04/2006		8372			0	
11885	MESA QUEEN UNIT #006	S	E-16-16S-32E	E	30-025-00396	I	02/2006	03/01/2008	3455	8455	Y	0	Y
	MESA QUEEN UNIT #007	S	F-16-16S-32E	F	30-025-20135	O	06/2008	07/01/2010	3463	8463		0	
	MESA QUEEN UNIT #008	S	G-16-16S-32E	G	30-025-00398	O	06/2008	07/01/2010	3406	8406		0	
	MESA QUEEN UNIT #010	S	L-17-16S-32E	L	30-025-20340	I	12/1992	01/01/1995	3470	8470	Y	0	Y
	MESA QUEEN UNIT #011	S	K-17-16S-32E	K	30-025-20230	I	12/1992	01/01/1995	3450	8450	Y	0	Y
	MESA QUEEN UNIT #013	S	I-17-16S-32E	I	30-025-20238	O	06/2008	07/01/2010	3485	8485		0	
	MESA QUEEN UNIT #015	S	K-16-16S-32E	K	30-025-20347	O	02/2006	03/01/2008	3425	8425	Y	0	Y
	MESA QUEEN UNIT #018	S	N-17-16S-32E	N	30-025-20313	I	12/1992	01/01/1995	3460	8460	Y	0	Y
	MESA QUEEN UNIT #020	S	P-17-16S-32E	P	30-025-20269	I	12/1992	01/01/1995	3500	8500	Y	0	Y
	MESA QUEEN UNIT #025	S	N-16-16S-32E	N	30-025-23483	I	06/2008	07/01/2010	3498	8498		0	
11886	MEXICO U #001	S	B-8-19S-38E	B	30-025-12512	O	04/1986	05/01/1988	4075	9075	Y	0	Y
	MEXICO U #002	S	G-8-19S-38E	G	30-025-12513	O	07/2008	08/01/2010	4148	9148		0	
	MEXICO U #003	S	B-8-19S-38E	B	30-025-30954	O	11/1998	12/01/2000	4300	9300	Y	0	Y
	MEXICO U #004	S	B-8-19S-38E	B	30-025-31933	O	06/2008	07/01/2010	4100	9100		0	
29674	PATRON STATE #001	S	I-8-19S-24E	I	30-015-32262	G			Unknown			0	
15434	SOUTH PEARL QUEEN UNIT #003	P	4-3-20S-35E	D	30-025-21772	O	02/2004	03/01/2006	5040	10040	Y	0	Y
	SOUTH PEARL QUEEN UNIT #005	F	H-4-20S-35E	H	30-025-03328	I	07/2005		5030			0	
	SOUTH PEARL QUEEN UNIT #006	P	E-3-20S-35E	E	30-025-03315	I	04/2005	05/01/2007	5040	10040	Y	0	Y
	SOUTH PEARL QUEEN UNIT #007	P	F-3-20S-35E	F	30-025-03316	I	08/1999	09/01/2001	5040	10040	Y	0	Y

	SOUTH PEARL QUEEN UNIT #008	F	L-3 -20S-35E	L	30-025-03317	O	02/2004			5042		0		
	SOUTH PEARL QUEEN UNIT #011	F	K-4 -20S-35E	K	30-025-03325	I	04/2005			5017		0		
	SOUTH PEARL QUEEN UNIT #016	F	O-4 -20S-35E	O	30-025-03321	O	02/2004			5024		0		
	SOUTH PEARL QUEEN UNIT #017	F	P-4 -20S-35E	P	30-025-03323	O	07/2008			4983		0		
	SOUTH PEARL QUEEN UNIT #019	F	N-3 -20S-35E	N	30-025-03319	I	02/2006			5040		0		
	SOUTH PEARL QUEEN UNIT #021	F	D-10-20S-35E	D	30-025-03342	I	12/1992			5045		0		
	SOUTH PEARL QUEEN UNIT #022	F	A-9 -20S-35E	A	30-025-03341	O	02/2004			5050		0		
	SOUTH PEARL QUEEN UNIT #028	F	J-4 -20S-35E	J	30-025-35894	O	07/2008			5031		0		
	SOUTH PEARL QUEEN UNIT #029	F	I-4 -20S-35E	I	30-025-36148	O	07/2008			5005		0		
15433	WEST PEARL QUEEN UNIT #103	P	C-29-19S-35E	C	30-025-03247	O	12/1979	01/01/1982		5039	10039	Y	0	Y
	WEST PEARL QUEEN UNIT #107	S	C-28-19S-35E	C	30-025-03231	O	03/1980	04/01/1982		5000	10000	Y	0	Y
	WEST PEARL QUEEN UNIT #108	S	F-28-19S-35E	F	30-025-03234	I	12/2003	01/01/2006		4975	9975	Y	0	Y
	WEST PEARL QUEEN UNIT #110	S	H-29-19S-35E	H	30-025-03254	I	02/1994	03/01/1996		4920	9920	Y	0	Y
	WEST PEARL QUEEN UNIT #112	P	F-29-19S-35E	F	30-025-03244	I	12/1992	01/01/1995		5030	10030	Y	0	Y
	WEST PEARL QUEEN UNIT #117	S	K-29-19S-35E	K	30-025-03241	O	03/1980	04/01/1982		5065	10065	Y	0	Y
	WEST PEARL QUEEN UNIT #118	S	J-29-19S-35E	J	30-025-03248	I	12/1992	01/01/1995		5010	10010	Y	0	Y
	WEST PEARL QUEEN UNIT #119	S	I-29-19S-35E	I	30-025-03240	I	04/1994	05/01/1996		4998	9998	Y	0	Y
	WEST PEARL QUEEN UNIT #120	S	L-28-19S-35E	L	30-025-03224	I	06/1995	07/01/1997		4946	9946	Y	0	Y
	WEST PEARL QUEEN UNIT #121	S	K-28-19S-35E	K	30-025-03225	I	06/1995	07/01/1997		4921	9921	Y	0	Y
	WEST PEARL QUEEN UNIT #122	S	J-28-19S-35E	J	30-025-03228	I	12/1992	01/01/1995		4945	9945	Y	0	Y
	WEST PEARL QUEEN UNIT #124	S	O-28-19S-35E	O	30-025-03229	I	06/1992	07/01/1994		4939	9939	Y	0	Y
	WEST PEARL QUEEN UNIT #125	S	N-28-19S-35E	N	30-025-03227	I	06/2002	07/01/2004		4949	9949	Y	0	Y
	WEST PEARL QUEEN UNIT #126	S	M-28-19S-35E	M	30-025-03226	I	12/2003	01/01/2006		4957	9957	Y	0	Y
	WEST PEARL QUEEN UNIT #127	S	P-29-19S-35E	P	30-025-03242	I	06/1995	07/01/1997		4962	9962	Y	0	Y
	WEST PEARL QUEEN UNIT #128	S	O-29-19S-35E	O	30-025-03249	I	06/2002	07/01/2004		4989	9989	Y	0	Y
	WEST PEARL QUEEN UNIT #129	S	N-29-19S-35E	N	30-025-03243	I	12/1994	01/01/1997		4967	9967	Y	0	Y
	WEST PEARL QUEEN UNIT #130	S	M-29-19S-35E	M	30-025-03250	O	07/2004	08/01/2006		4950	9950	Y	0	Y
	WEST PEARL QUEEN UNIT #134	S	B-31-19S-35E	B	30-025-03262	I	12/1992	01/01/1995		4924	9924	Y	0	Y
	WEST PEARL QUEEN UNIT #135	S	A-31-19S-35E	A	30-025-03261	O	01/2004	02/01/2006		4790	9790	Y	0	Y
	WEST PEARL QUEEN UNIT #140	S	D-33-19S-35E	D	30-025-03283	I	12/1992	01/01/1995		4954	9954	Y	0	Y
	WEST PEARL QUEEN UNIT #143	S	A-33-19S-35E	A	30-025-03286	I	08/1996	09/01/1998		4905	9905	Y	0	Y
	WEST PEARL QUEEN UNIT #153	S	G-31-19S-35E	G	30-025-03265	O	01/2005	02/01/2007		4936	9936	Y	0	Y
	WEST PEARL QUEEN UNIT #154	S	F-31-19S-35E	F	30-025-03266	O	01/2005	02/01/2007		5029	10029	Y	0	Y
	WEST PEARL QUEEN UNIT #163	S	D-33-19S-35E	D	30-025-22870	O	01/1993	02/01/1995		5020	10020	Y	0	Y
	WEST PEARL QUEEN UNIT #164	S	F-32-19S-35E	F	30-025-23083	O	03/1980	04/01/1982		5055	10055	Y	0	Y
	WEST PEARL QUEEN UNIT #167	S	O-29-19S-35E	O	30-025-23313	O	02/2006	03/01/2008		5018	10018	Y	0	Y
	WEST PEARL QUEEN UNIT #169	S	N-28-19S-35E	N	30-025-25365	O	01/2005	02/01/2007		5000	10000	Y	0	Y
	WEST PEARL QUEEN UNIT #170	S	C-32-19S-35E	C	30-025-29326	O	07/2008	08/01/2010	Unknown	Unknown		0		
	WEST PEARL QUEEN UNIT #180	S	K-28-19S-35E	K	30-025-30868	O	02/2006	03/01/2008		5075	10075	Y	0	Y
	WEST PEARL QUEEN UNIT #182	S	I-29-19S-35E	I	30-025-31123	O	07/2008	08/01/2010		5062	10062		0	
	WEST PEARL QUEEN UNIT #190	S	I-29-19S-35E	I	30-025-31020	O	07/2008	08/01/2010		5058	10058		0	
	WEST PEARL QUEEN UNIT #191	S	M-28-19S-35E	M	30-025-30861	O	10/2003	11/01/2005		5075	10075	Y	0	Y
	WEST PEARL QUEEN UNIT #192	S	J-28-19S-35E	J	30-025-30867	O	10/2003	11/01/2005		5050	10050	Y	0	Y
	WEST PEARL QUEEN UNIT #193	S	N-28-19S-35E	N	30-025-30862	O	07/2008	08/01/2010		5075	10075		0	
	WEST PEARL QUEEN UNIT #195	S	O-29-19S-35E	O	30-025-31021	O	02/2004	03/01/2006		5100	10100	Y	0	Y
	WEST PEARL QUEEN UNIT #202	S	B-32-19S-35E	B	30-025-31125	O	01/2004	02/01/2006		5100	10100	Y	0	Y
	WEST PEARL QUEEN UNIT #204	S	D-33-19S-35E	D	30-025-31022	O	07/2008	08/01/2010		5100	10100		0	
	WEST PEARL QUEEN UNIT #205	S	C-33-19S-35E	C	30-025-31023	O	07/2008	08/01/2010		5100	10100		0	
	WEST PEARL QUEEN UNIT #220	S	E-28-19S-35E	E	30-025-32256	O	07/2008	08/01/2010		5087	10087		0	
	WEST PEARL QUEEN UNIT #301	S	H-31-19S-35E	H	30-025-36791	O	07/2008	08/01/2010		5120	10120		0	

WHERE Ogrid:25482

Submit 3 Copies To Appropriate District Office  
 District I  
 1625 N. French Dr., Hobbs, NM 88240  
 District II  
 1301 W. Grand Ave., Artesia, NM 88210  
 District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 June 19, 2008

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

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.)		WELL API NO. 30-025-24287
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator XERIC OIL & GAS CORPORTATION		6. State Oil & Gas Lease No. 33175
3. Address of Operator 14781 MEMORIAL DR., STE. 1754, HOUSTON TX 77079		7. Lease Name or Unit Agreement Name CROSBY DEEP
4. Well Location Unit Letter G Section 33 Township 25S Range 37E NMPM County LEA		8. Well Number 002
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 25482
10. Pool name or Wildcat 13450 CROSBY; FUSSELMAN		

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

<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input checked="" type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/>		<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Move in, rig up. Perform Mechanical Integrity test on the casing. Providing that the casing is good we will run down hole pump assembly and put the well onto production. Necessary stimulation will be considered once the casing integrity has been determined.

If casing is not good we will either run packer, squeeze hole in casing or plug.

This will be done according to rig availability. We are currently testing rig anchors and conditioning roads for rig accessibility.

Spud Date:  Rig Release Date:

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

SIGNATURE *[Signature]* TITLE Vice President DATE 9-4-08  
 Type or print name \_\_\_\_\_ E-mail address: \_\_\_\_\_ PHONE: \_\_\_\_\_  
**For State Use Only**

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ BEFORE THE OIL CONSERVATION DIVISION  
 Conditions of Approval (if any): \_\_\_\_\_ Santa Fe, New Mexico  
 Case 14106..... Exhibit C  
 Submitted by:  
**XERIC OIL AND GAS CORPORATION**  
 Hearing Date: September 4, 2008

Submit 3 Copies To Appropriate District Office  
 District I  
 1625 N. French Dr., Hobbs, NM 88240  
 District II  
 1301 W. Grand Ave., Artesia, NM 88210  
 District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 June 19, 2008

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

WELL API NO. 30-025-11870
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 33175
7. Lease Name or Unit Agreement Name CROSBY DEEP
8. Well Number 003
9. OGRID Number 25482
10. Pool name or Wildcat 13450 CROSBY; FUSSELMAN

**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  
XERIC OIL & GAS CORPORTATION

3. Address of Operator  
14781 MEMORIAL DR., STE. 1754, HOUSTON TX 77079

4. Well Location  
 Unit Letter J  
 Section 33 Township 25S Range 37E 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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK X	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 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Move in, rig up. Perform Mechanical Integrity test on the casing. Providing that the casing is good we will run down hole pump assembly and put the well onto production. Necessary stimulation will be considered once the casing integrity has been determined.

If casing is not good we will either run packer, squeeze hole in casing or plug.

This will be done according to rig availability. We are currently testing rig anchors and conditioning roads for rig accessibility.

Spud Date:  Rig Release Date:

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

SIGNATURE *Frank C. [Signature]* TITLE Vice President DATE 9-4-08  
 Type or print name \_\_\_\_\_ E-mail address: \_\_\_\_\_ PHONE: \_\_\_\_\_  
**For State Use Only**

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 Conditions of Approval (if any): \_\_\_\_\_

Submit 3 Copies To Appropriate District Office  
 District I  
 1625 N. French Dr., Hobbs, NM 88240  
 District II  
 1301 W. Grand Ave., Artesia, NM 88210  
 District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 June 19, 2008

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

WELL API NO. 30-025-23891
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. 33175
7. Lease Name or Unit Agreement Name CROSBY DEEP
8. Well Number 001
9. OGRID Number 25482
10. Pool name or Wildcat 13450 CROSBY; FUSSELMAN

**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  
XERIC OIL & GAS CORPORTATION

3. Address of Operator  
14781 MEMORIAL DR., STE. 1754, HOUSTON TX 77079

4. Well Location  
 Unit Letter N  
 Section 28 Township 25S Range 37E 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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK X	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 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Move in, rig up. Perform Mechanical Integrity test on the casing. Providing that the casing is good we will run down hole pump assembly and put the well onto production. Necessary stimulation will be considered once the casing integrity has been determined.

If casing is not good we will either run packer, squeeze hole in casing or plug.

This will be done according to rig availability. We are currently testing rig anchors and conditioning roads for rig accessibility.

Spud Date:  Rig Release Date:

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

SIGNATURE [Signature] TITLE V.P. PRESIDENT DATE 9-4-08  
 Type or print name \_\_\_\_\_ E-mail address: \_\_\_\_\_ PHONE: \_\_\_\_\_  
**For State Use Only**

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 Conditions of Approval (if any): \_\_\_\_\_

Submit 3 Copies To Appropriate District Office  
 District I  
 1625 N. French Dr., Hobbs, NM 88240  
 District II  
 1301 W. Grand Ave., Artesia, NM 88210  
 District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 June 19, 2008

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

WELL API NO. 30-025-25985
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 33175
7. Lease Name or Unit Agreement Name CROSBY DEEP
8. Well Number 004
9. OGRID Number 25482
10. Pool name or Wildcat 13450 CROSBY; FUSSELMAN

**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  
XERIC OIL & GAS CORPORTATION

3. Address of Operator  
14781 MEMORIAL DR., STE. 1754, HOUSTON TX 77079

4. Well Location  
 Unit Letter C  
 Section 33 Township 25S Range 37E 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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK X	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 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

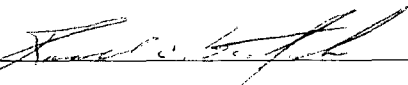
Move in, rig up. Perform Mechanical Integrity test on the casing. Providing that the casing is good we will run down hole pump assembly and put the well onto production. Necessary stimulation will be considered once the casing integrity has been determined.

If casing is not good we will either run packer, squeeze hole in casing or plug.

This will be done according to rig availability. We are currently testing rig anchors and conditioning roads for rig accessibility.

Spud Date:  Rig Release Date:

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

SIGNATURE  TITLE Vice President DATE 9-4-08  
 Type or print name \_\_\_\_\_ E-mail address: \_\_\_\_\_ PHONE: \_\_\_\_\_  
**For State Use Only**

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 Conditions of Approval (if any): \_\_\_\_\_

Submit 3 Copies To Appropriate District Office  
 District I  
 1625 N. French Dr., Hobbs, NM 88240  
 District II  
 1301 W. Grand Ave., Artesia, NM 88210  
 District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 June 19, 2008

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

WELL API NO. <b>30-025-11871</b>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 33176
7. Lease Name or Unit Agreement Name GREGORY EL PASO FEDERAL
8. Well Number 004
9. OGRID Number 25482
10. Pool name or Wildcat 96121 SWD; SAN ANDRES

**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** SHUT IN

2. Name of Operator  
XERIC OIL & GAS CORPORTATION

3. Address of Operator  
14781 MEMORIAL DR., STE. 1754, HOUSTON TX 77079

4. Well Location  
 Unit Letter K  
 Section 33 Township 25S Range 37E 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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input checked="" 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 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

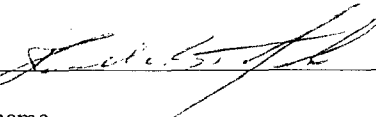
Move in, rig up. Perform Mechanical Integrity test on the casing. Providing that the casing is good we will run down hole pump assembly and put the well onto production. Necessary stimulation will be considered once the casing integrity has been determined.

If casing is not good we will either run packer, squeeze hole in casing or plug.

This will be done according to rig availability. We are currently testing rig anchors and conditioning roads for rig accessibility.

Spud Date:  Rig Release Date:

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

SIGNATURE  TITLE Vice President DATE 9-4-08  
 Type or print name \_\_\_\_\_ E-mail address: \_\_\_\_\_ PHONE: \_\_\_\_\_  
**For State Use Only**

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 Conditions of Approval (if any): \_\_\_\_\_

Submit 3 Copies To Appropriate District Office  
 District I  
 1625 N. French Dr., Hobbs, NM 88240  
 District II  
 1301 W. Grand Ave., Artesia, NM 88210  
 District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 June 19, 2008

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

<b>WELL API NO.</b> 30-025-20491
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 33176
7. Lease Name or Unit Agreement Name GREGORY EL PASO FEDERAL
8. Well Number 001
9. OGRID Number 25482
10. Pool name or Wildcat 75480 CROSBY; DEVONIAN
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

**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 GAS**

2. Name of Operator  
XERIC OIL & GAS CORPORTATION

3. Address of Operator  
14781 MEMORIAL DR., STE. 1754, HOUSTON TX 77079

4. Well Location  
 Unit Letter O  
 Section 33 Township 25S Range 37E NMPM County LEA

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input checked="" 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 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

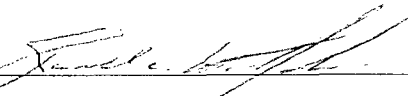
Move in, rig up. Perform Mechanical Integrity test on the casing. Providing that the casing is good we will run down hole pump assembly and put the well onto production. Necessary stimulation will be considered once the casing integrity has been determined.

If casing is not good we will either run packer, squeeze hole in casing or plug.

This will be done according to rig availability. We are currently testing rig anchors and conditioning roads for rig accessibility.

Spud Date:  Rig Release Date:

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

SIGNATURE  TITLE Vice President DATE 9-11-08  
 Type or print name \_\_\_\_\_ E-mail address: \_\_\_\_\_ PHONE: \_\_\_\_\_  
**For State Use Only**

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 Conditions of Approval (if any): \_\_\_\_\_



Submit 3 Copies To Appropriate District Office  
 District I  
 1625 N. French Dr., Hobbs, NM 88240  
 District II  
 1301 W. Grand Ave., Artesia, NM 88210  
 District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 June 19, 2008

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

WELL API NO. <b>30-025-11865</b>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 19073
7. Lease Name or Unit Agreement Name GREGORY C
8. Well Number 001
9. OGRID Number 25482
10. Pool name or Wildcat JALMAT; TAN-YATES-7 RVRS

**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 OIL**

2. Name of Operator  
XERIC OIL & GAS CORPORTATION

3. Address of Operator  
14781 MEMORIAL DR., STE. 1754, HOUSTON TX 77079

4. Well Location  
 Unit Letter C  
 Section 33 Township 25S Range 37E 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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK X	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 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Move in, rig up. Perform Mechanical Integrity test on the casing. Providing that the casing is good we will run down hole pump assembly and put the well onto production. Necessary stimulation will be considered once the casing integrity has been determined.

If casing is not good we will either run packer, squeeze hole in casing or plug.

This will be done according to rig availability. We are currently testing rig anchors and conditioning roads for rig accessibility.

Spud Date:  Rig Release Date:

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

SIGNATURE *[Signature]* TITLE Vice president DATE 9-4-08  
 Type or print name \_\_\_\_\_ E-mail address: \_\_\_\_\_ PHONE: \_\_\_\_\_  
**For State Use Only**

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 Conditions of Approval (if any): \_\_\_\_\_

Submit 3 Copies To Appropriate District Office  
 District I  
 1625 N. French Dr., Hobbs, NM 88240  
 District II  
 1301 W. Grand Ave., Artesia, NM 88210  
 District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 June 19, 2008

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

WELL API NO. <b>30-025-29539</b>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 19072
7. Lease Name or Unit Agreement Name GREGORY A
8. Well Number 008
9. OGRID Number 25482
10. Pool name or Wildcat 37240 LANGLIE MATTIX; 7 RVRS-Q-GRAYBURG

**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 GAS**

2. Name of Operator  
XERIC OIL & GAS CORPORTATION

3. Address of Operator  
14781 MEMORIAL DR., STE. 1754, HOUSTON TX 77079

4. Well Location  
 Unit Letter I  
 Section 33 Township 25S Range 37E 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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK X	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 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Move in, rig up. Perform Mechanical Integrity test on the casing. Providing that the casing is good we will run down hole pump assembly and put the well onto production. Necessary stimulation will be considered once the casing integrity has been determined.

If casing is not good we will either run packer, squeeze hole in casing or plug.

This will be done according to rig availability. We are currently testing rig anchors and conditioning roads for rig accessibility.

Spud Date:  Rig Release Date:

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

SIGNATURE *[Signature]* TITLE Vice president DATE 9-4-08  
 Type or print name \_\_\_\_\_ E-mail address: \_\_\_\_\_ PHONE: \_\_\_\_\_  
**For State Use Only**

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 Conditions of Approval (if any): \_\_\_\_\_

Submit 3 Copies To Appropriate District Office  
 District I  
 1625 N. French Dr., Hobbs, NM 88240  
 District II  
 1301 W. Grand Ave., Artesia, NM 88210  
 District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 June 19, 2008

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

WELL API NO. <b>30-025-11884</b>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 19072
7. Lease Name or Unit Agreement Name GREGORY A
8. Well Number 005
9. OGRID Number 25482
10. Pool name or Wildcat 96117 SWD; QUEEN
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

**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 SHUT IN**

2. Name of Operator  
XERIC OIL & GAS CORPORTATION

3. Address of Operator  
14781 MEMORIAL DR., STE. 1754, HOUSTON TX 77079

4. Well Location  
 Unit Letter I  
 Section 33 Township 25S Range 37E NMPM County LEA

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK X	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 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Move in, rig up. Perform Mechanical Integrity test on the casing. Providing that the casing is good we will run down hole pump assembly and put the well onto production. Necessary stimulation will be considered once the casing integrity has been determined.

If casing is not good we will either run packer, squeeze hole in casing or plug.

This will be done according to rig availability. We are currently testing rig anchors and conditioning roads for rig accessibility.

Spud Date:  Rig Release Date:

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

SIGNATURE *[Signature]* TITLE Vice president DATE 6-4-08  
 Type or print name \_\_\_\_\_ E-mail address: \_\_\_\_\_ PHONE: \_\_\_\_\_  
**For State Use Only**

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 Conditions of Approval (if any): \_\_\_\_\_

Submit 3 Copies To Appropriate District Office  
 District I  
 1625 N. French Dr., Hobbs, NM 88240  
 District II  
 1301 W. Grand Ave., Artesia, NM 88210  
 District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 June 19, 2008

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

WELL API NO. <b>30-025-11867</b>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 19072
7. Lease Name or Unit Agreement Name GREGORY A
8. Well Number: 007
9. OGRID Number 25482
10. Pool name or Wildcat 37240 LANGLIE MATTIX; 7 RVRS-Q-GRAYBURG
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

**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 OIL

2. Name of Operator  
XERIC OIL & GAS CORPORTATION

3. Address of Operator  
14781 MEMORIAL DR., STE. 1754, HOUSTON TX 77079

4. Well Location  
 Unit Letter N  
 Section 33 Township 25S Range 37E NMPM County LEA

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK X	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 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Move in, rig up. Perform Mechanical Integrity test on the casing. Providing that the casing is good we will run down hole pump assembly and put the well onto production. Necessary stimulation will be considered once the casing integrity has been determined.

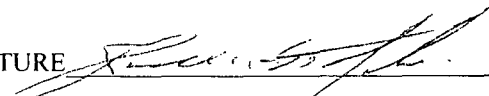
If casing is not good we will either run packer, squeeze hole in casing or plug.

This will be done according to rig availability. We are currently testing rig anchors and conditioning roads for rig accessibility.

Spud Date:

Rig Release Date:

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

SIGNATURE  TITLE Vice President DATE 9-4-08  
 Type or print name \_\_\_\_\_ E-mail address: \_\_\_\_\_ PHONE: \_\_\_\_\_  
**For State Use Only**

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 Conditions of Approval (if any): \_\_\_\_\_