

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

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

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

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.	30-025-20340
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	K-867
7. Lease Name or Unit Agreement Name	Mesa Queen Unit
8. Well No.	10
9. Pool name or Wildcat	Mesa Queen Assoc.

<p>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)</p>	
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Water Injection Well	
2. Name of Operator Xeric Oil & Gas Corporation	
3. Address of Operator P O Box 352, Midland, TX 79702	
4. Well Location Unit Letter <u>L</u> : <u>1650</u> Feet From The <u>South</u> Line and <u>990</u> Feet From The <u>West</u> Line Section <u>17</u> Township <u>16S</u> Range <u>32E</u> NMZPM Lea County	
10. Elevation (Show whether DF, RKB, RT, CR, etc.) 4355' DF	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
<p>NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/></p> <p>OTHER: Re-instate TA status. <input type="checkbox"/></p>	<p>SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/></p> <p>CASING TEST AND CEMENT JOB <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>

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.

1. Contact NMOCDD to witness pressure test (give 24 hr advance notice).
2. Nipple up to injection head with kill truck.
3. Circulate casing with treated water.
4. Pressure test to 500# for 30 minutes recording results on chart.
5. Nipple down injection head from kill truck.
6. Re-instate Temporarily Abandon Status.

I hereby certify that the information above is true and complete to the best of my knowledge and belief		
SIGNATURE <u>RC Barnett</u>	TITLE <u>President</u>	DATE <u>12-14-99</u>
TYPE OR PRINT NAME <u>RC Barnett</u>	TELEPHONE NO. <u>915-683-3171</u>	
(This space for State Use)	DISTRICT 1 SUPERVISOR	DEC 20 1999
APPROVED BY <u>Chris Williams</u>	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		