Submit 3 Copies To Appropriate District Office State of New Mexico	P
District I Energy, Minerals and Natural Resources	Form C-103 Revised March 25, 1999
1625 N. French Dr., Hobbs, NM 87240 District II	WELL API NO.
811 South First, Artesia, NM 87210 OIL CONSERVATION DIVISION	30-025-31021
District III 1000 Rio Brazos Rd., Aztec, NM 87410 2040 South Pacheco	5. Indicate Type of Lease
District IV Santa Fe. NM 87505	STATE STATE
2040 South Pacheco, Santa Fe, NM 87505	6. State Oil & Gas Lease No. E-1587
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	7. Lease Name or Unit Agreement Name:
incitoration	West Prest o
1. Type of Well: Oil Well X Gas Well Other	West Pearl Queen Unit
Oil Well X Gas Well Other 2. Name of Operator	
Xeric Oil & Gas Corporation	8. Well No. 195
3. Address of Operator P. O. Box 352	9. Pool name or Wildcat
4. Well Location Midland, TX 79702	Pearl Queen
4. Well Location	
Unit Letter 0 : 100 feet from the South line and	1340 feet from the East line
Soutier 00	1340 feet from the <u>East</u> line
Section 29 Township 19S Range 35E NMPM County Lea	
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3745 Gr	
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR	K ALTERING CASING
TEMPORARILY ABANDON 🖾 CHANGE PLANS 🖂 COMMENCE DRI	
PULL OR ALTER CASING	ARANDONMENT
COMPLETION CEMENT JOB	AD [
OTHER: OTHER:	<u></u>
12. Describe proposed or completed operations. (Clearly state all partirous desiles and	<u>U</u>
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. For Multiple Completions: Attach wellbore diagram of proposed completion	
or recompilation. MY RECORAS	
MY RECURAS	JHOW TOP PERF
1. SI well. 2. TOH W/production equipment NO HIGER	NECOS TO DE
2. TOH W/production equipment.	IHAN 7888e
3. Set CIBP @ 4500'.	THAN 4888 - 12 13 14 15 76 12 10 10 10 10 10 10 10 10 10 10 10 10 10
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4. Test as per NMOCD guidelines & request TA status.	\(\sigma_0 \)
and the second s	Co MAK SOUNT S.
THE COMMISSION MUST BE NOTIFIED 24	S housived
	Hopps (2)
TA RUGGING OPERATIONS TOR THE	1 1
TO BE APPROVED.	2500
	E0862871782626
I hereby certify that the information above is true and complete to the best of my knowledge	ge and belief.
SIGNATURE MACHINE TITLE Production	
Angie Crawford X	Analyst DATE 4/8/04 432-683-3171
Type or print name ACrawford@xerico(1.com (This space for State use)	Telephone No.
A CONTRACTOR OF THE CONTRACTOR	
APPPROVED BY Lay W. WWW. REPRÉSENTATIVE	DATE 1 5 2004
Conditions of approval if amer	