Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103		
District I Energy, Minerals and Natural Resources 1625 N. French Dr., Hobbs, NM 88240			WELL API NO.	Revised March 25, 1999	
District II ONCEDVATION DIVIGION				30-025-34569	
District III 2040 South Pacheco			5. Indicate Type		
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505			STATE 6. State Oil & 0	Gas Lease No.	
2040 South Pacheco, Santa Fe, NM 87505				o. State Off &	Jas Lease No.
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.				7. Lease Name or Unit Agreement Name: Mooney	
1. Type of Well: Oil Well X Gas Well	☐ Other				•
2. Name of Operator Xeric Oil & Gas Corporation				8. Well No.	
3. Address of Operator				9. Pool name or Wildcat	
P. O. Box 352, Midland, TX 79702				House Drinkard	
4. Well Location					
Unit Letter I :	1980 feet from	n the South	line and	feet fro	om the <u>East</u> line
Section 13			inge 38E	NMPM Lea	County
10. Elevation (Show whether DR, RKB, RT, GR, etc.)					
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data					
			SEQUENT RE		
PERFORM REMEDIAL WORK	PLUG AND ABAN		REMEDIAL WOR	K L	ALTERING CASING L
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DR	ILLING OPNS. 🗌	.
PULL OR ALTER CASING	MULTIPLE COMPLETION		CASING TEST A CEMENT JOB	ND	
OTHER:		. 🗆	OTHER: Surf	ace Commingle	_ []
TEMPORARILY ABANDON					
6/1/03 Begin Surface Con	nmingling the nro	oduction from	the Paige #1 W	Vell and the Mod	oney #1 Well at the
Mooney Battery (I-13-20S	38E) as per adm	ninistrative O	rder PLC-227:	ven and the woo	1181920213
	, 1	BOD	BWD	MCFD /	(161)
Paige #1		8.4 (60%)	15.3 (62%)	13.4 (64%)	
Mooney #1		5.6 (40%)	9.4 (38%)	7.4 (36%)	2 1/2
TOTAL PR	RODUCTION	14	24.7	20.8	887.25 R
Vania mili tant and 11 C	<i>a</i> 1 1	•	1 11	· / [5	rdingly.
Xeric will test each well for	or three days ever	ry six months	and reallocate	production accor	rdingly.
					Secondary.
			i		001
I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
SIGNATURE Charge Crayford Across and Crayford Cr					
Telephone No.					
(This space for State use)					
APPPROVED BY LOUIS TAKE ANALYSE 2004 Conditions of approval, if any.					
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