

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 87240
District II
811 South First, Artesia, NM 87210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-103
Revised March 25, 1999

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. 30-025-31021
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 checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Xeric Oil & Gas Corporation		6. State Oil & Gas Lease No. E-1587
3. Address of Operator P. O. Box 352 Midland, TX 79702		7. Lease Name or Unit Agreement Name: West Pearl Queen Unit
4. Well Location Unit Letter 0 : 100 feet from the South line and 1340 feet from the East line Section 29 Township 19S Range 35E NMPM County Lea		8. Well No. 195
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3745 Gr.		9. Pool name or Wildcat Pearl Queen

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input 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 COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: Request TA Status <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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

5/2/04 TOH W/production equipment.
Set CIBP @ 4900'.

5/3/04 The casing was pressured to 500 psi over a 36 minute period. The test was deemed successful. The chart is attached. Request TA Status.

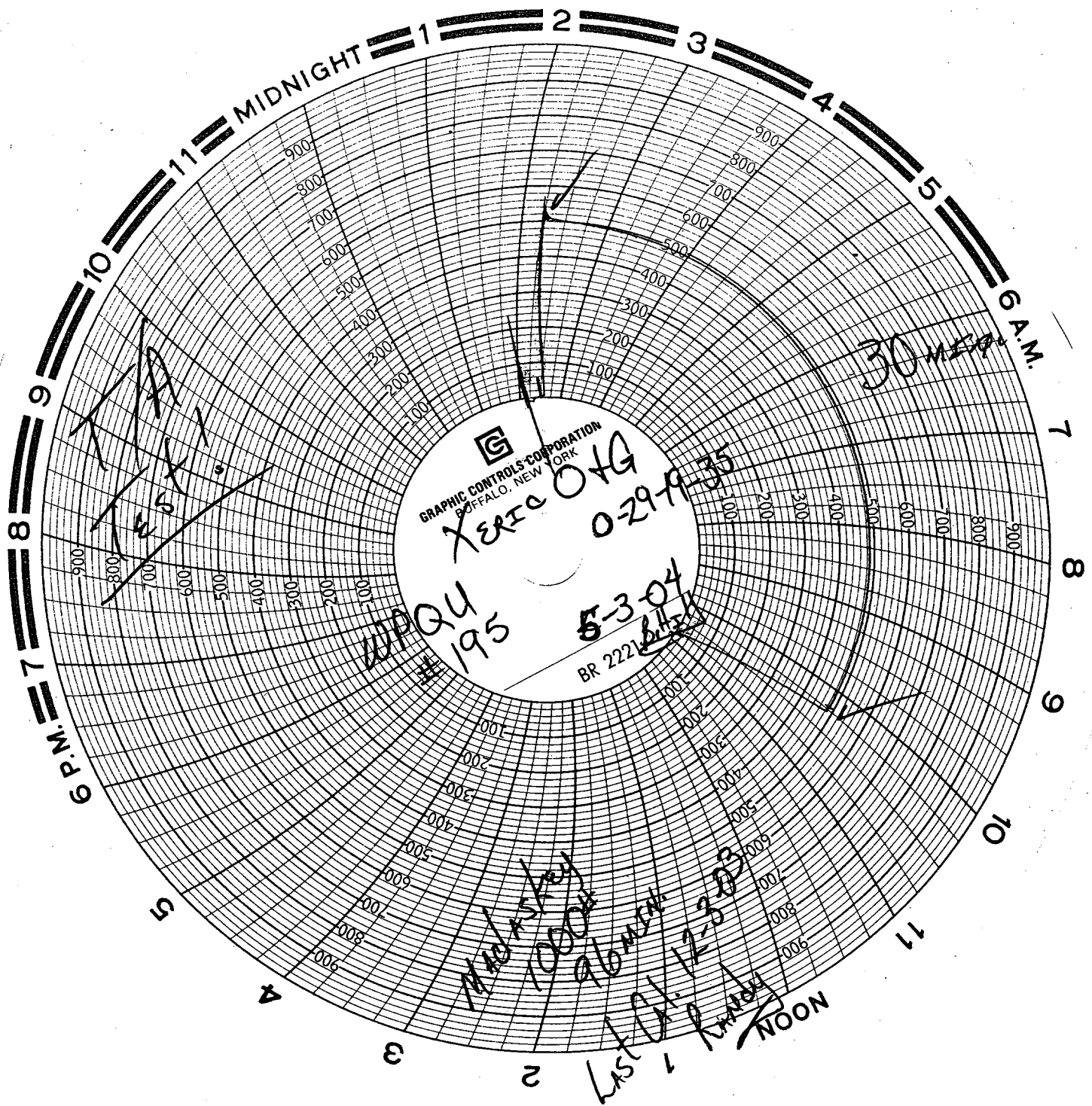
This Approval of Temporary
Abandonment Expires

5/3/09

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

SIGNATURE Angie Crawford TITLE Production Analyst DATE 7/20/04
Type or print name ACrawford@xericoil.com 432-683-3171
(This space for State use) Telephone No.

APPROVED BY Harry W. Wink TITLE OC FIELD REPRESENTATIVE II / STAFF MANAGER DATE JUL 27 2004
Conditions of approval, if any:



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