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

WELL API NO.
30-041-~~1-123~~ 10123

5. Indicate Type of Lease
STATE ☐ FEE ☐

6. State Oil & Gas 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.)

1. Type of Well:
Oil Well ☐ Gas Well ☐ Other Injection

7. Lease Name or Unit Agreement Name:
Horton Federal

2. Name of Operator
Xeric Oil & Gas Corporation

8. Well No.
#29

3. Address of Operator
PO Box 352 Midland, Texas 79702

9. Pool name or Wildcat
Milnesand San Andres

4. Well Location

Unit Letter H : 1650; feet from the North line and 990 feet from the East line

Section 29 Township 8S Range 35E NMPM County Roosevelt

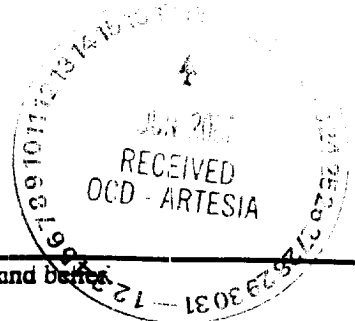
10. Elevation (*Show whether DR, RKB, RT, GR, etc.*)
4201' GR

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	☒	PLUG AND ABANDON	☐	REMEDIAL WORK	☐	ALTERING CASING	☐
TEMPORARILY ABANDON	☐	CHANGE PLANS	☐	COMMENCE DRILLING OPNS.	☐	PLUG AND ABANDONMENT	☐
PULL OR ALTER CASING	☐	MULTIPLE COMPLETION	☐	CASING TEST AND CEMENT JOB	☐		
OTHER:			☐	OTHER:			☐

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.

1. MIRU PU
2. Unseat packer & pull 2 3/8" tubing
3. Redress or replace packer
4. TIH w/packer and tubing, testing tubing to 5,000PSI below the slips
5. Set packer 50' above top perfs
6. Load backside with KCL water and corrosion inhibitor and pressure test. If OK nipple up well and RDMO PU
7. Contact NMOCD to witness MIT (give 24 hr advance notice)
8. Pressure test per NMOCD regulations
9. Return well to water injection



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

SIGNATURE Glenda Hunt TITLE Senior Production Analyst DATE 6/14/01

Type or print name Glenda Hunt
915-683-3650
Telephone No.

(This space for State use)

APPPROVED BY _____ TITLE _____ DATE _____

Conditions of approval, if any:

ORIGINAL SIGNED BY GARY W. WINK FIELD REP. II