Type of Well:

2. Name of Operator

OIL WELL

DISTRICT 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

Pyramid Energy, Inc.

## OIL CONSERVATION DIVISION

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

TA-Oil Well

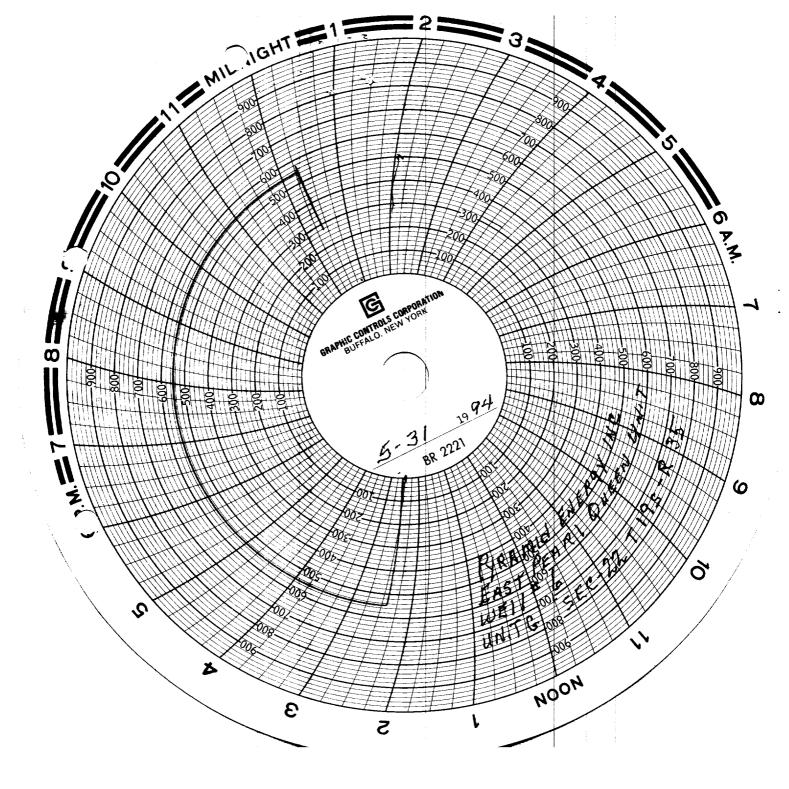
OTHER

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.)

OAS \_\_\_

Revised 1-1-89
WELL API NO. 30-025-0 <del>3315</del>
5. Indicate Type of Lease  STATE  FEE X
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name
East Pearl Queen Unit
8. Well No.
9. Pool name or Wildcat
Pearl Queen
110 Feet From The <u>East</u> Line
NMPM Lea County
Report, or Other Data  BSEQUENT REPORT OF:
ALTERING CASING
IG OPNS. PLUG AND ABANDONMENT
CEMENT JOB
g Integrity Test x
luding estimated date of starting any proposed
g Integrity Test. Pressure plug above perfs was leaking.
plug above period was reaking.
minutes to record pressure.
S Manager 06/14/94
(210) 308_800

3. Address of Operator 10101 Reunion Place, Ste. 210 San Antonio, TX 78216 4. Well Location Unit Letter G: 2310 Feet From The North 19S Township Section 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3749 DF Check Appropriate Box to Indicate Nature of Notice, F NOTICE OF INTENTION TO: SUE PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLIN CASING TEST AND C PULL OR ALTER CASING OTHER: 12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, incl work) SEE RULE 1103. Pressured up on casing to 340 psi for Casing 05/08/94 built to 380 psi in 20 minutes. Suspected Set CIBP at 4640' above existing plug. 05/16/94 05/31/94 Pressured casing to 550 psi and held for 30 Chart is attached. I hereby certify that the information above is true and complete to the best of my knowledge and belief. Operation Hol TITLE SIGNATURE Scott Graef TELEPHONE NO. (ZIU) 300 TYPE OR PRINT NAME ORIGINAL SIGNED BY JERRY SEXTON (This space for State Use) JUN 28 1994 DISTRICT I SUPERVISOR TITLE -AITROVED BY -CONDITIONS OF APPROVAL, IP ANY:



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