Submit 3 Copies To Appropriate District Office State of New Mexico	<u>_</u>
District I Energy, Minerals and Natural Recourses	Form C-103 Revised March 25, 1999
District II	WELL API NO.
811 South First, Artesia, NM 87210 OIL CONSERVATION DIVISION District III	30-025-03180
1000 Rio Brazos Rd., Aztec, NM 87410 2040 South Pacheco	5. Indicate Type of Lease
District IV Santa Fe, NM 87505 2040 South Pacheco, Santa Fe, NM 87505	STATE FEE 53 6. State Oil & Gas Lease No.
	o. Same on the 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	7. Lease Name or Unit Agreement Name:
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well:	East Pearl Queen Unit
Oil Well Gas Well Other 2. Name of Operator	
2. Name of Operator Xeric Oil & Gas Corporation	8. Well No.
3. Address of Operator P. O. Box 352	9. Pool name or Wildcat
4. Well Location Midland, TX 79702	Pearl Queen
With Sociation	
Unit Letter 0: 1980 feet from the East line and 660 feet from the South line	
Section 00	
Section 22 Township 19S Range 35E NMPM Lea County 10. Elevation (Show whether DR, RKB, RT, GR, etc.)	
3736	
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
DEPENDING THE INTENTION TO: SUBS	SEQUENT REPORT OF
REMEDIAL WORK	☐ ALTERING CASING ☐
TEMPORARILY ABANDON	LING OPNS. PLUG AND
PULL OR ALTER CASING MULTIPLE CASING TEST AN	ARANDONIATAR
COMPLETION CEMENT JOB	
OTHER: OTHER: MT	
12. Describe proposed or completed operations. (Clearly state all particularly in the internal in the internal	
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion	
A MIT	
A MIT was performed on this well 7/11/02. The casing was pressured to 560 PSI over a	
30 minute period. The test was deemed successful. The chart is attached. Request TA Status.	
Status.	
Abandonnest Francisco	
Abandonment Expires	7/30/07
I hereby postifications in Communication	_
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE Maye Court TITLE Production Analyst DATE 7/26/02	
Angle Crawford ()	SHL7/20/02
Type or print name (This space for State use)	915-683-3171 Telephone No.
APPPROVED BY Conditions of approval, if any: GARY W. WHEE DATE 11 9 0 2022	
	STAFF MANAGER JUL 2 0 2002

