Submit 3 Copies To Appropriate District Office	State of New M	exico	Form C-103
District I	Energy, Minerals and Natural Resources		Revised March 25, 1999
1625 N. French Dr., Hobbs, NM 87240 District II		WELL API NO.	
111 South First, Artesia, NM 87210 OIL CONSERVATION DIVISION		30-025-03182	
District III 1000 Rio Brazos Rd., Aztec, NM 87410 2040 South Pacheco		5. Indicate Type of Lease	
District IV Santa Fe. NM 87505		STATE FEE	
2040 South Pacheco, Santa Fe, NM 87505			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:			7. Lease Name or Unit Agreement Name:
Oil Well Gas Well Other			East Pearl Queen Unit
2. Name of Operator Xeric Oil & Gas Corporation			8. Well No. #8
3. Address of Operator P. O.	Box 352		9. Pool name or Wildcat
4. Well Location Midlane	d. TX 79702		Pearl Queen
4. Well Location			
Unit Letter K : 1	980 feet from the South	line and 19	80feet from theline
Section 22 Township 19S Range 35E NMPM Lea County			
10. Elevation (Show whether DR, RKB, RT, GR, etc.)			
3750' DF			
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 SUBSEQUENT REPORT OF: REMEDIAL WORK ALTERING CASING			
TEMPORARILY ABANDON CH	IANGE PLANS	COMMENCE DRIL	•
	ULTIPLE DMPLETION	CASING TEST AND CEMENT JOB	
OTHER:		OTUEO	
12. Describe proposed or completed on	perations (Clearly state all no	OTHER: MI	Ye pertinent dates, including estimated date
or recompilation.	E ROLE 1103. For Multiple (completions: Attach	wellbore diagram of proposed completion
A MIT was performed on this well 7/11/02. The casing was pressured to 500 PSI over a 30 minute period. The test was deemed successful. The chart is attached. Request TA			
Status.			
			er i de la companya d
	/		£ 1.20
T	his Approval of Tem	Borary	ACTOS STATES
	bandonment Expires	7/30	07
			The second secon
I hereby certify that the information above	e is true and complete to the b	est of my knowledge	e and belief
SIGNATURE Chage	audord TITLE	Production A	
Angie Crawford Type or print name		· · · · · · · · · · · · · · · · · · ·	915-683-3171
(This space for State use)			Telephone No.
•	0.00.00	·	••
APPPROVED BY Conditions of approval, if any:	ORIGINAL SIG		DATE 1 3 A A
Conditions of approval. If any			
		om men elektrik til til blad Bek Beg.	100 SEMPRICACITÉ. 3 0 2632