

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

## OIL CONSERVATION DIVISION

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

WELL API NO.

30-025-003190

5. Indicate Type of Lease

STATE ☐FEE ☒

6. State Oil &amp; 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-TA

2. Name of Operator

Pyramid Energy, Inc.

3. Address of Operator

10101 Reunion Place, Ste. 210 San Antonio, TX 78216

4. Well Location

Unit Letter F : 2310 Feet From The North Line and 1650 Feet From The West Line

Section 22 Township 19S Range 35E NMMP Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3751' DF

7. Lease Name or Unit Agreement Name

East Pearl Queen Unit

8. Well No.

5

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 ☐PLUG AND ABANDON ☐TEMPORARILY ABANDON ☐CHANGE PLANS ☐PULL OR ALTER CASING ☐OTHER: ☐

## SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☒CASING TEST AND CEMENT JOB ☐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.

06/07/94 Tagged bridge plug at 4679' and spotted 25 sacks of cement on top of plug. Circulated hole with mud. Located holes with tubing and packer from 1000' to 100'. Obtained plugging instructions from NMOCD. Spotted 87 sacks of cement at 1250'. Pumped 35 sacks cement down 4 1/2" casing and circulated back to surface between the 8 5/8" and 4 1/2" casings. Did not displace cement down 4 1/2" casing. Top of cement inside of 4 1/2" casing at surface. Cut off wellhead 3' below surface and welded on cap and marker. Well plugged and abandoned.

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

SIGNATURE

TITLE

Operations Manager

DATE 06/20/94

TYPE OR PRINT NAME

Scott Graef

TELEPHONE NO. (210) 308-8000

(This space for State Use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY