Submit 3 Copies To Appropriate District Office	State of New M	lexico	
District I	Energy, Minerals and Nat		Form C-103
1625 N. French Dr., Hobbs, NM 87240 District II			Revised March 25, 1999 WELL API NO.
811 South First, Artesia, NM 87210 OIL CONSERVATION DIVISION			30-025-03215
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 NOT	ICES AND REPORTS ON WELL	\$	
CONCLUSE THIS FORM FOR PROPOSALS TO DOT LOD TO DEEDED OD DUTIES -			7. Lease Name or Unit Agreement Name:
PROPOSALS.)			Fort During 1
1. Type of Well:			East Pearl Queen Unit
Oil Well Gas Well Other			
2. Name of Operator Xeric Oil & Gas Corporation			8. Well No.
			28
			9. Pool name or Wildcat
4. Well Location Midland, TX 79702			Pearl Queen
· · · · · · · · · · · · · · · · · · ·			
Unit Letter H :	1980 feet from the North	line and	660 feet from the East line
Section 27	T		line
	Township 195 R	ange 35E	NMPM Lea County
	10. Elevation (Show whether D 3723' GL	K, RKB, RT, GR, etc.)
11. Check A	ppropriate Box to Indicate N	ature of Motion T	
			SECUENT DEDOT
		REMEDIAL WORK	SEQUENT REPORT OF:
			LUNG OPNS. 🔲 PLUG AND 📩
PULL OR ALTER CASING	MULTIPLE	CASING TEST AN	ARANDONINGUT
	COMPLETION	CEMENT JOB	
OTHER:	Г		
12. Describe proposed or complete	d operations (Clearly state all	OTHER: MI	
of starting any proposed work).	SEE RULE 1103. For Multinue	unent details, and gi	T ve pertinent dates, including estimated date wellbore diagram of proposed completion
or recompilation.		ompicuons: Attach	wentoore diagram of proposed completion
A MIT was portan	and on this wall 2/20/02 T	he easter -	
30 minute nominal	ned on this well 2/20/02. T	ne casing was p	ressured to 520 PSI over a
Statua	The test was deemed succes	ssrui. The chart	is attached. Request IA
Status.			· · · · ·
	· ·		
· · · · · · · · · · · · · · · · · · ·		/	· · · ·
	/		
	This Approval of	Temporary	/ / <u>a</u>
	Abandonment Expir	es	7/20/07
			130/01
hereby partification of the			
I hereby certify that the information	above is true and complete to the b	est of my knowledge	e and belief.
SIGNATURE Chica,	April a		
Angie Crawfor	TITLE_	Production A	Analyst DATE 7/26/02
Type or print name	u U		<u>915-683-3171</u>
(This space for State use)			Telephone No.
			· · · · · · · · · · · · · · · · · · ·
APPPROVED BY	ONTIDEAL	SIGNED BY	JUL 3 0 701
Conditions of approval, if any:	GARY W. V	VINK	DATE200
	OC FIELD §	EPRESENTATIVE	till a the second s

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