

Submit 3 Copies To Appropriate District Office

District I

1625 N. French Dr., Hobbs, NM 87240

District II

811 South First, Artesia, NM 87210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION

2040 South Pacheco

Santa Fe, NM 87505

Form C-103
Revised March 25, 1999

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.)		WELL API NO. 30-025-03219
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Xeric Oil & Gas Corporation		6. State Oil & Gas Lease No.
3. Address of Operator P. O. Box 352 Midland, TX 79702		7. Lease Name or Unit Agreement Name: East Pearl Queen Unit
4. Well Location Unit Letter 0 : 660 feet from the South line and 1980 feet from the East line Section 27 Township 19S Range 35E NMPM Lea County		8. Well No. 37
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3716' DF		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 ☐ MULTIPLE COMPLETION ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

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

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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

A MIT was performed on this well 7/10/02. The casing was pressured to 540 PSI over a 30 minute period. The test was deemed successful. The chart is attached. Request TA Status.

This Approval of Temporary
Abandonment Expires

7/30/02

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

SIGNATURE Angie Crawford TITLE Production Analyst DATE 7/26/02

Type or print name

Angie Crawford

915-683-3171
Telephone No.

(This space for State use)

APPROVED BY

ORIGINAL SIGNED BY

GARY WITVLEK

Conditions of approval, if any:

OC FIELD REPRESENTATIVE / STAFF MANAGER

DATE JUL 30 2002

