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State of New Mickello Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

P.O. Box 1980, Hobbs, NM 88240 OIL C: SERVATION P.O. Box 2088			N DIVISION WELL API NO. 30-025-03257			
DISTRICT I' Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210				5. Indicate Type of Lease		
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410				STATE X FEE 6. State Oil & Gas Lease No. E-5885		
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.)				7. Lease Name or Unit Agreement Name		
1. Type of Well: OIL OAS WELL OTHER TA-Injection				West Pearl Queen Unit		
2. Name of Operator				8. Well No.		
Pyramid Energy, Inc.				131		
3. Address of Operator				Pool name or Wildcat		
10101 Reunion Place, Ste. 210 San Antonio, TX 78216				Pearl Queen		
4. Well Location Unit Letter	P : 660 Feet From	The South	Line and660	Feet From 7	The East	Line
Section 30	Township	19S	35E	hn m	Lea c	
		Elevation (Show whether I	uge	NMPM		County
11.	Check Appropriate	Box to Indicate N	Nature of Notice R	Report or Other 1	Data	
11 1				BSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WO					ALTERING CASING	
TEMPORARILY ABANDON				IG OPNS.	PLUG AND ABANDONN	MENT 🗵
PULL OR ALTER CASING CASING T			CASING TEST AND C	EMENT JOB		
OTHER:		OTHER:				
12. Describe Proposed or C work) SEE RULE 110	Completed Operations (Clearly sta 3.	te all pertinent details, an	ed give pertinent dates, incl	uding estimated date of s	starting any proposed	
05/24/94	Tagged CIBP at 4 circulated hole vil900'. Perforate of cement down 4 the 4 1/2" and 8 left cement inside level and weld on	with mud laden ed 4 1/2" casi 1/2" casing a 5/8" casings. de 4 1/2" casi	fluid. Spotting with 4 shot ind circulated Did not disping at surface.	ed 25 sack ce s at 187'. P cement back t lace cement d	ment plug at Jumped 90 sacks so surface betw Jown 4 1/2" cas	ween sing,
I hereby certify that the infon	nation above in true and complete to the	ne best of my knowledge and	bdiď.	· 		
SIGNATURE Leit	Short	m	u=_Operations	Manager .	DATE05/25/9	94
TYPE OR PRINT NAME	Scott Graef				теценноме но. (21)	<u>)) 308-</u> 8000
(Thus space for State Use)	John II a		OH & GA	IS INSPECTOR	## a :	7 20 1
ALTROVED BY	myll Hill	π	T.E	w margerok	— DATE ————	<u></u>
LIAVORERA PO ZROCITICACO	F#Y:					

PETERS!