

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

Form C-103
Revised March 25, 1999

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

WELL API NO. 30-025-30861
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. E-8183
7. Lease Name or Unit Agreement Name: West Pearl Queen Unit
8. Well No. 191
9. Pool name or Wildcat Pearl Queen
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3722' GR

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.)

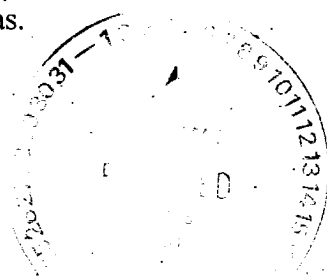
1. Type of Well:
Oil Well ☒ Gas Well ☐ Other ☐
2. Name of Operator
Xeric Oil & Gas Corporation
3. Address of Operator
P. O. Box 352
Midland, TX 79702

4. Well Location
Unit Letter M : 1310 feet from the South line and 1310 feet from the West line
Section 28 Township 19S Range 35E NMPM Lea County NM

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 ☐	REMEDIAL WORK ☐ ALTERING CASING ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐	CASING TEST AND CEMENT JOB ☐
OTHER: ☐	OTHER: Return to Production ☒

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 recompilation.

5/01/02 Performed remedial work. Returned well to production.
Well tested for 24 hrs making 1 BOPD, 103 BWPD and no gas.



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 7/31/02

Type or print name Angie Crawford Telephone No. _____

(This space for State use)

APPROVED BY _____
Conditions of approval, if any:

ORIGINAL SIGNED BY
PAUL F. KAUTZ
TITLE PETROLEUM ENGINEER

DATE 12 2002