

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

WELL API NO.

30-025-31106

5. Indicate Type of Lease

STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name:

East Pearl Queen Unit

8. Well No.

77

9. Pool name or Wildcat

Pearl Queen

**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 I : 2563 feet from the South line and 40 feet from the East line

Section 28 Township 19S Range 35E NMPM Lea County NM

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

3719' GR

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: 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 recompletion.

4/30/02

Performed remedial work. Returned well to production.  
Well tested for 24 hrs making 1 BOPD, 113 BWPB, 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 \_\_\_\_\_ TITLE \_\_\_\_\_

Conditions of approval, if any:

ORIGINAL SIGNED BY

PAUL F. KAUTZ

PETROLEUM ENGINEER

DATE 7/31/02