

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-025-34593
Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
State Oil & Gas Lease No. A - 1118
Lease Name or Unit Agreement Name Goodwin State
Well No. 1
Pool name or Wildcat Wildcat, Abo

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.)	
Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	
Name of Operator Xeric Oil & Gas Corporation	
Address of Operator P. O. Box 352, Midland, Texas 79702	
Well Location Unit Letter D 330 Feet From The North Line and 330 Feet From The West Line Section 6 Township 19S Range 37E NMPM Lea County	
Elevation (Show whether DF, RKB, RT, GR, etc.) 3735 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 ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

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

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.

5/15/99 - Spud 12 1/4" hole @ 7:00 PM MST

5/16/99 - TD surface hole (12 1/4") @ 1618' - RIH w/ 38 jts 8 5/8" - 24# - K55 csg to a setting depth of 1618'
Cement w/ lead - 590 sx - class "c" + 4% gel + 2% CacI2 + 1/4 #/sx celloflake - Tail w/ 200 sx class "c"
+ 2% CacI2 - circulated 32 sx cement to surface

5/17/99 - WOC 18 hrs - Install H2S Equipment - Test BOP's to 3000 psi - begin drilling 7 7/8" hole

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

SIGNATURE  TITLE Consulting Engineer DATE 05-18-99

TYPE OR PRINT NAME Michael G. Mooney TELEPHONE NO. 915/683-3171

(This space for State Use)

APPROVED BY  TITLE STATE REPRESENTATIVE DATE 05-18-99

CONDITIONS OF APPROVAL, IF ANY: