

District I  
PO Box 1980, Hobbs, NM 88241-1980

District II  
811 South First, Artesia, NM 88210

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

District IV  
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION  
2040 South Pacheco  
Santa Fe, NM 87505

Form C-101  
Revised October 18, 1994  
Instructions on back  
Submit to Appropriate District Office  
State Lease - 6 Copies  
Fee Lease - 5 Copies

☐ AMENDED REPORT

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

Operator Name and Address Mewbourne Oil Company PO Box 5270 Hobbs, New Mexico 88241		OGRID Number 14744
Property Name Smith 11 Com		API Number 30-015-23898
Property Code 29668	Well No. 1	

Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West Line	County
C	11	24S	27E		990	North	1980	West	Eddy

Proposed Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West Line	County
Proposed Pool 1 Delaware					Proposed Pool 2				

Work Type Code P	Well Type Code O	Cable/Rotary	Lease Type Code P	Ground Level Elevation 3111
Multiple	Proposed Depth 3500	Formation Delaware	Contractor	Spud Date

Proposed Casing and Cement Program

Hole Size	Casing Size	Casing weight/foot	Setting Depth	Sacks of Cement	Estimated TOC
17 1/2"	13 3/8"	54.5	500	1042	Surface
12 1/4"	9 5/8"	48	2200	1700	Surface
8 3/4"	7"	23	10368	1400	6000'
6 1/8"	4 1/2"	13.5	12697	360	10246. Liner Top

Describe the proposed program. If this application is to DEEPEN or PLUG BACK give the data on the present productive zone and proposed new productive zone. Describe the blowout prevention program, if any. Use additional sheets if necessary.

This well is open in the Strawn. Mewbourne Oil Company would like to plug the Strawn perms @ 11189-11216 & test the Delaware @ 3200 as follows:  
Set CIBP @ 11130 w/ 35' cement. Run CBL. Perforate Delaware @ 3170-3185'. Test for production.  
During this workover, a 900 series BOP will be used.

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

Signature:

Printed name:

N.M. Young

Title:

District Manager

OIL CONSERVATION DIVISION

Approved By:

Title:

Approval Date:

Expiration Date:

Well plugged back  
w/o OCS approval

**District I**  
1625 N. French Dr., Hobbs, NM 88240

**District II**  
1301 W. Grand Avenue, Artesia, NM 88210

**District III**  
1000 Rio Brazos Rd., Aztec, NM 87410

**District IV**  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals & Natural Resources Department  
**OIL CONSERVATION DIVISION**  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-102  
Revised August 15, 2000  
Submit to Appropriate District Office  
State Lease - 4 Copies  
Fee Lease - 3 Copies

☐ AMENDED REPORT

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

<sup>1</sup> API Number 30-015-23898		<sup>2</sup> Pool Code		<sup>3</sup> Pool Name Delaware	
<sup>4</sup> Property Code 29668		<sup>5</sup> Property Name Smith 11 Com			<sup>6</sup> Well Number 1
<sup>7</sup> OGRID No. 14744		<sup>8</sup> Operator Name Mewbourne Oil Company			<sup>9</sup> Elevation 3111' GL

<sup>10</sup> Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
C	11	24S	27E		990	North	1980	West	Eddy

<sup>11</sup> Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

<sup>12</sup> Dedicated Acres 40	<sup>13</sup> Joint or Infill	<sup>14</sup> Consolidation Code	<sup>15</sup> Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

<sup>16</sup> 	<sup>17</sup> <b>OPERATOR CERTIFICATION</b> I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.			
	Signature _____ 			
	Printed Name _____ N.M. Young			
	Title _____ District Manager			
Date _____ 3/31/03				
<sup>18</sup> <b>SURVEYOR CERTIFICATION</b> I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.	Date of Survey _____			
	Signature and Seal of Professional Surveyor: _____			
	Certificate Number _____			