

Submit 1 Copy To Appropriate District
Office
District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised July 18, 2013

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	WELL API NO. 30-015-41777
2. Name of Operator Mewbourne Oil Company	5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
3. Address of Operator PO Box 5270, Hobbs NM 88241	6. State Oil & Gas Lease No. E-1819-4 (SL) LG-4171-4 (BHL)
4. Well Location Unit Letter <u>L</u> : <u>2080</u> feet from the <u>South</u> line and <u>230</u> feet from the <u>West</u> line Section <u>36</u> Township <u>18S</u> Range <u>29E</u> NMPM Eddy County	7. Lease Name or Unit Agreement Name Bradley 36 LI State Com
	8. Well Number 1H
	9. OGRID Number 14744
	10. Pool name or Wildcat Santo Nino; Bone Spring 54600
	11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3442'

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

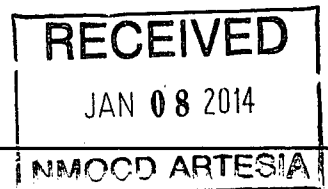
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input checked="" type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

12/02/13..MI & spud 17 1/2" hole. TD'd hole @ 297'. Ran 297' of 13 3/8" 48# H40 ST&C csg. Cemented w/180 sks Thixad Class C with additives. Mixed @ 14.4#/g w/1.58 yd. Tail w/350 sks Class C w/2% CaCl2. Mixed @ 14.8#/g w/1.34 yd. Plug down @ 2:15 PM 12/03/13. Did not circ cmt. Ran temperature survey indicating TOC @ 140'. RIH w/1" pipe & tag @ 141'. Cmt in 6 stages w/225 Class C w/2 & 4% CaCl2. Mixed @ 14.4#/g w/1.58 yd. Circ 6 sks of cmt to the pit. WOC. At 4:00 PM 12/05/13, tested BOPE & csg to 1250# for 30 minutes, held OK. Drilled out with 12 1/4" bit.

Spud Date: 12/02/13

Rig Release Date:



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

SIGNATURE Jackie Lathan TITLE Regulatory DATE 12/23/13

Type or print name Jackie Lathan E-mail-address: jlathan@mewbourne.com PHONE: 575-393-5905

For State Use Only

APPROVED BY: [Signature] TITLE Dist. Rep. DATE Jan 8, 2014

Conditions of Approval (if any):