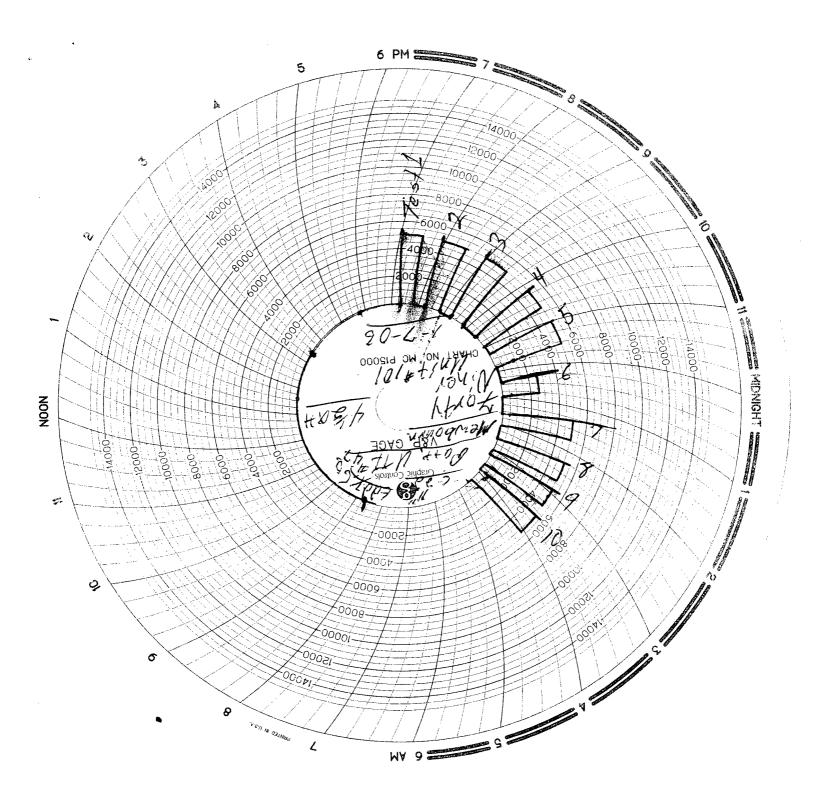
Submit 3 Copies To Appropriate District	State of New Mexico Form C-			Form C-103		
Office District I	Energy, Minerals and Natural Resources		Revised March 25, 1999			
1625 N. French Dr., Hobbs, NM 88240				WELL API NO.		
<u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION			30-015-34331 5. Indicate Type of Lease		
District III	1220 South St. Francis Dr.		STATE			
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505		505		Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM	•			VB0158	Gus Leuse 110.	
87505	CES AND REPORTS ON	WELLS		7 Lassa Nama	or Unit Agreement	
(DO NOT USE THIS FORM FOR PROPOS			G BACK TO A	Name:	of Olit Agreement	
DIFFERENT RESERVOIR. USE "APPLIC	CATION FOR PERMIT" (FORM	C-101) FO	R SUCH			
PROPOSALS.) 1. Type of Well:				Forty Niner Ridg	e Unit	
Oil Well Gas Well X	Other	r				
2. Name of Operator			SECEINED	8. Well No.		
Mewbourne Oil Company	14744		JAN 1 1 2006	#101		
3. Address of Operator		10	iu-Mateom	Pool name o	•	
PO Box 5270 Hobbs, NM 88241			DISCHALL I WASHING	Forty Niner Ridg	ge: Morrow 76800	
4. Well Location						
Unit LetterN_:_660	feet from theSouth_	line a	and1980feet	from theWest	iline	
Section 16	Township 23S I	Range	30E N	IMPM Eddy	County	
	10. Elevation (Show wh	hether DR	, RKB, RT, GR, etc	.)		
	3159' GL				The second secon	
	appropriate Box to Ind	licate Na		-		
NOTICE OF IN		_ \		SEQUENT RE		
PERFORM REMEDIAL WORK	PLUG AND ABANDON		REMEDIAL WORK	< L	ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRII	LING OPNS.□	PLUG AND ABANDONMENT	
PULL OR ALTER CASING	MULTIPLE COMPLETION		CASING TEST AN CEMENT JOB	ID 🗆		
OTHER:			OTHER: Cmt and	d Csg Test		
12. Describe proposed or completed	d operations. (Clearly state	all pertin	nent details, and giv	e pertinent dates,	including estimated date of	
starting any proposed work). SI recompilation.	EE RULE 1103. For Multip	ple Comp	eletions: Attach we	llbore diagram of	proposed completion or	
01/07/06TD'd 12 1/4" hole @ 358						
	5 #/g with 2.04 cf/sk yd. Ta					
	:30 pm 01/06/06. Circulate					
	d). At 7:45 am on 01/08/06 Drilled out with 8 3/4" b		3/8 casing to 130	U# 10r 30 mins as i	required, neid OK. Charts	
and selferimine attached.	Diffica out with 6 3/4 0	,,,,,				
I hereby certify that the information	above is true and complete	to the be	st of my knowledge	and belief.		
SIGNATURE SIGNATURE			obbs Regulatory _		OATE01/09/06	
Type or print name Kristi	Green		Telep	hone No. 505-39	3-5905	
(This space for State use)					MAN 1 2 2000	
APPPROVED BY Conditions of approval, if any:	OR RECORDS ON	TALE				



WELDING SERVICES, INC. P.O. Box 1541 • Lovington, N.M. 88260 BUS: 505 396-4540 • FAX: 505 396-0044

INVOICE B 5398

TOTAL 2023

Company Mewoourn	<i></i>	Date/	<u>-2-26</u>	Start Time	
Lease Forty Nine		201		County Et Ay	State_///a/
Company Man				/	
Wellhead Vender		Tester	Q 21 - 90	water	
Drlg. Contractor <u> </u>	MII			Rig #_ <i>-</i>	<u> </u>
Tool Pusher					
Plug Type		Plug Size/	<u>/ </u>	Drill Pipe Size	<u> 2 X H</u>
Casing Valve Opened			Check Valve Open_	Je5	
ANNULAR 15 RAMS 12 RAMS 13 RAMS 14	26 2 4 4 8b	Rotating Head	24 22 22 23	19	17
TT TT					
9 10 7 8 TEST # ITEMS TESTED		OW PSI HIGH PSI	21	20 REMARKS	
	TEST LENGTH L		21,	REMARKS	
		5000			
TEST # ITEMS TESTED 1 25,65,67,6 2 1,25,10,13	TEST LENGTH L	5000 5000		REMARKS	
TEST # ITEMS TESTED 1 25,25,5,7,1 2 1 2 5 10,13 3 3,4,5,10,13	TEST LENGTH L	5000 5000 5000		REMARKS) Leak	
TEST # ITEMS TESTED 1 25,65,67,6 2 1,25,10,13	TEST LENGTH L	5000 5000 5000 5000		REMARKS	
TEST # ITEMS TESTED 1 25,25,5,7,1 2 1 2 5 10,13 3 3,4,5,10,13	TEST LENGTH L	5000 5000 5000 5000 5000		REMARKS) Leak	
TEST # ITEMS TESTED 1 25,25,69,13 2 1,25,10,13 3 3,4,5,10,13 4 3,11,12 5 7,11,12 6 7,11,15	TEST LENGTH L	5000 5000 5000 5000 5000 2539		REMARKS) Leak	d No
TEST # ITEMS TESTED 1 25, 25, 5, 7, 1, 2 3 3, 4, 5, 10, 13 4 8, 11, 12 5 7, 11, 12 6 7, 11, 15 7 19	TEST LENGTH L	5000 5000 5000 5000 5000 2500		REMARKS 1 Leak 1 Lajour Had to co	d No
TEST # ITEMS TESTED 1 25, 35, 5, 7, 1, 2 1, 2 5, 10, 13 3 3, 4 5, 10, 13 4 8, 11, 12 5 7, 11, 12 6 7, 11, 15 7 19 8 18	TEST LENGTH L	5000 5000 5000 5000 5000 2500 5000		REMARKS 1 Leak 1 Lajour Had to co	d No
TEST # ITEMS TESTED 1 25,25,69,15 2 1,25,10,13 3 3,4,5,10,13 4 3,11,12 5 7,11,12 6 7,11,12 6 7,11,15 7 19 8 13 9 18	TEST LENGTH 1 3 5 1 1 1 1 1 1 1 1 1	5000 5000 5000 5000 5000 2539 5000 5000		REMARKS 1 Leak 1 Lajour Had to co	d No
TEST # ITEMS TESTED 1 25, 35, 5, 7, 1, 2 1, 2 5, 10, 13 3 3, 4 5, 10, 13 4 8, 11, 12 5 7, 11, 12 6 7, 11, 15 7 19 8 18	TEST LENGTH L	5000 5000 5000 5000 5000 2500 5000		REMARKS 1 Leak 1 Lajour Had to co	d No
TEST # ITEMS TESTED 1 25,25,69,15 2 1,25,10,13 3 3,4,5,10,13 4 3,11,12 5 7,11,12 6 7,11,12 6 7,11,15 7 19 8 13 9 18	TEST LENGTH 1 3 5 1 1 1 1 1 1 1 1 1	5000 5000 5000 5000 5000 2539 5000 5000		REMARKS 1 Leak 1 Lajour Had to co	d No

MAN WELDING SERVICES, MC

Company Menbourn	Date
Lease Forty Niner	Unit 10 County Eddy
Drilling Contractor Bath, 11 T	7 47 Plug & Drill Pipe Size 11 6-32 / 4 3 x 4

Accumulator Function Test - OO&GO#2

To Check - USABLE FLUID IN THE NITROGEN BOTLES (III.A.2.c.i. or ii or iii)

• Make sure all rams and annular are open and if applicable HCR is closed.

• Ensure accumulator is pumped up to working pressure! (Shut off all pumps)

RECEIVED

Jan 1 1 2006 Ociu-matedia

- 1. Open HCR Valve. (If applicable)
- 2. Close annular.
- 3. Close all pipe rams.
- 4. Open one set of the pipe rams to simulate closing the blind ram.
- 5. For 3 ram stacks, open the annular to achieve the 50+ % safety factor. (5M and greater systems).
- 6. Record remaining pressure 1500 psi. Test Fails if pressure is lower than required.
- **a.** {950 psi for a 1500 psi system} **b.** {1200 psi for a 2000 & 3000 psi system}
- 7. If annular is closed, open it at this time and close HCR.

To Check - PRECHARGE ON BOTTLES OR SPHERICAL (III.A.2.d.)

- Start with manifold pressure at, or above, maximun acceptable pre-charge pressure:
 - **a.** {800 psi for a 1500 psi system} **b.** {1100 psi for 2000 and 3000 psi system}
 - 1. Open bleed line to the tank, slowly. (gauge needle will drop at the lowest bottle pressure)
 - 2. Close bleed line. Barely bump electric pump and see what pressure the needle jumps up to.
 - 3. Record pressure drop 1050 psi. Test fails if pressure drops below minimum.
- Minimum: a. {700 psi for a 1500 psi system } b. {900 psi for a 2000 & 3000 psi system}

To Check - THE CAPACITY OF THE ACCUMULATOR PUMPS (III.A.2.f.)

- Isolate the accumulator bottles or spherical from the pumps & manifold.
- Open the bleed off valve to the tank, {manifold psi should go to 0 psi} close bleed valve.
 - 1. Open the HCR valve, {if applicable}
 - 2. Close annular
 - 3. With pumps only, time how long it takes to regain the required manifold pressure.
 - 4. Record elapsed time 1:34. Test fails if it takes over 2 minutes.
- a. {950 psi for a 1500 psi system} b. {1200 psi for a 2000 & 3000 psi system}