Submit 1 Copy To Appropriate District State of New Mexico	Form C-103
District I – (575) 393-6 NM OIL CONSERVATION Minerals and Natural Resources 1625 N. French Dr., Hobbs, NM 822891A DISTRICT	Revised August 1, 2011 WELL API NO.
District II - (575) 748-1283 811 S. First St., Artesia, NM 882SEP 02 2018 OIL CONSERVATION DIVISION	30-015-43154 5. Indicate Type of Lease
District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	STATE 🔲 FEE 🖂
District IV – (505) 476-3460 RECEIVED 1220 S. St. Francis Dr., Santa Fe, NM 87505	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(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.)	Boston 7 W2DA Fee8. Well Number1H
1. Type of Well: Oil Well Gas Well Other 2. Name of Operator	9. OGRID Number 14744
Mewbourne Oil Company	
3. Address of Operator PO Box 5270, Hobbs, NM 88240	10. Pool name or Wildcat: Culebra Bluff; Wolfcamp, South (Gas)
4. Well Location	
Unit LetterD:330feet from theNorth line and185_ Section 7 Township 24S Range28E	feet from theWestline NMPM County Eddy
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	<u> </u>
3092' GL	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING	
TEMPORARILY ABANDON 🔲 CHANGE PLANS 🛛 COMMENCE DRILLING OPNS. 🗍 P AND A 🗌	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT DOWNHOLE COMMINGLE I	JOB 🗌
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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.	
Mewbounre Oil Company has an approved APD for the above well. MOC would like to cancel the APD. Please call Bradley Bishop with any questions.	
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Hell data updated to reflect Ourical when	
Well data updated to reflect vertical well Well # changed to #1	
Jell - Critarique -	
Spud Date: Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE TITLE Regulary DATE 9-1-16	
Type or print name <u>Bradley Bishop</u> E-mail address: <u>bbishop@mewbourne.com</u> PHONE: <u>575-393-5905</u>	
For State Use Only	
APPROVED BY: Aren Any TITLE Dust parte and DATE 9-2-16 Conditions of Approval (if any):	

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