

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
RECEIVED
OIL CONSERVATION DIVISION
JAN 28 2019
1220 South St. Francis Dr.
Santa Fe, NM 87505
DISTRICT II-ARTESIA O.C.D.

Form C-103
Revised July 18, 2013

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.)		WELL API NO. 30-015-28002
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Mewbourne Oil Company		6. State Oil & Gas Lease No. VB-1417
3. Address of Operator P.O. Box 5270, Hobbs, NM 88241		7. Lease Name or Unit Agreement Name Hoss BHK State
4. Well Location Unit Letter I : 1980 feet from the S line and 660 feet from the E line Section 2 Township 25S Range 28E NMPM County Eddy		8. Well Number 1
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2946' GL		9. OGRID Number 14774
		10. Pool name or Wildcat 64453 Willow Lake; Delaware, SW-96855

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 checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input 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.

11/19/18 MIRU plugging equipment. 11/20/18 Unhung well head, Unseated pump. POH w/ rods & pump. Dug out cellar. ND tbg, NU BOP. POH w/ 20 stands of tbg. 11/21/18 POH w/ BHA. Set 5 1/2" CIBP @ 4574'. Circulated hole w/ MLF. Pressure tested csg, held. Spotted 25 sx class C cmt @ 4574-4327'. WOC. 11/26/18 Tagged plug @ 4330'. Spotted 25 sx class C cmt w/ 2% CACL @ 2671-2424'. WOC. Tagged plug @ 2450'. POH w/ tbg. ND BOP. Spotted 65 sx class C cmt @ 604' & circulated to surface. 11/27/18 Rigged down & moved off. 11/29/18 Moved in backhoe and welder. Dug out cellar, cut off well head, & verified cement to surface. Welded on "Above Ground Dry Hole Marker". Backfilled cellar, cut off deadmen, cleaned location, and moved off.

Spud Date:

Rig Release Date:

ENTERED
1/13/19

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 1/4/19
Type or print name Jackie Lathan E-mail address: j.lathan@mewbourne.com PHONE: 575-393-5903
For State Use Only

APPROVED BY: [Signature] TITLE Staff mg DATE 1/30/19
Conditions of Approval (if any):