Type or print name

For State Use Only: APPROVED BY:

Monty Whetstone

Patricia L Martinez

TITLE

Form C-103 State of New Mexico 1625 N. French Dr., Hobbs, NM 88240 Phone:(575) 393-6161 Fax:(575) 393-0720 **Energy, Minerals and Natural Resources** Permit 311567 District II WELL APLNIIMBER 811 S. First St., Artesia, NM 88210 **Oil Conservation Division** Phone:(575) 748-1283 Fax:(575) 748-9720 30-025-49268 **District III** 5. Indicate Type of Lease 1220 S. St Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410 Phone:(505) 334-6178 Fax:(505) 334-6170 6 State Oil & Gas Lease No. District IV **Santa Fe, NM 87505** 1220 S. St Francis Dr., Santa Fe, NM 87505 Phone:(505) 476-3470 Fax:(505) 476-3462 7. Lease Name or Unit Agreement Name SUNDRY NOTICES AND REPORTS ON WELLS CABRA NINO 14 11 B2MD (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" STATE COM (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: 8. Well Number 002H 2. Name of Operator 9. OGRID Number MEWBOURNE OIL CO 14744 3. Address of Operator 10. Pool name or Wildcat P.O. Box 5270, Hobbs, NM 88241 4. Well Location Unit Letter \underline{M} : $\underline{255}$ feet from the S line and feet 1290 from the W Township 22S Range 34E NMPM Section 14 County Lea 11. Elevation (Show whether DR, KB, BT, GR, etc.) 3475 GR Pit or Below-grade Tank Application or Closure __ Depth to Groundwater___ ___ Distance from nearest fresh water well__ _ Distance from nearest surface water Pit Type mil Below-Grade Tank: Volume_ bbls; Construction Material Pit Liner Thickness: 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON ALTER CASING REMEDIAL WORK TEMPORARILY ABANDON CHANGE OF PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDON CASING/CEMENT JOB PULL OR ALTER CASING MULTIPLE COMPL X Other: Other: Drilling/Cement 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. SEE ATTACHMENT11/25/2021 Spudded well. **Casing and Cement Program** Date String Fluid Hole Csg Weight Grade Fst Doth Yield Class Pres Open Type Size Size lb/ft TOC Set Dpth Held Drop Hole 11/25/21 Surf FreshWater 17.5 13.375 54.5 J55 0 1808 1150 2 31 0 1500 0 Υ FreshWater 12.25 9.625 40 HCL80 0 5806 1950 1500 0 Υ 12/01/21 Int1 2.17 С 0 12/06/21 Prod Mud 8.75 29 HPP110 0 9442 950 2.68 Н 0 1500 0 Υ HCP110 12/14/21 FreshWater 6.125 4.5 9278 20290 775 1.75 Н 2500 Υ Liner1 13.5 0 I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan Vice President Operations SIGNATURE Electronically Signed TITLE E-mail address

prodmgr@mewbourne.com

Telephone No.

903-561-2900

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