

Submit a 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

WELL API NO. 30-025-49267
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Cabra Nino 14/11 B2MD State Com
8. Well Number 1H
9. OGRID Number 14744
10. Pool name or Wildcat OJO CHISO; BONE SPRING
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3476' GR

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 ☒ Gas Well ☐ Other ☐

2. Name of Operator
MEWBOURNE OIL COMPANY

3. Address of Operator
4801 Business Park Blvd, Hobbs, NM 88241

4. Well Location
 Unit Letter M : 255 feet from the SOUTH line and 1250 feet from the WEST line
 Section 14 Township 22S Range 34E NMPM LEA County

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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
DOWNHOLE COMMINGLE <input type="checkbox"/>	P AND A <input type="checkbox"/>
CLOSED-LOOP SYSTEM <input type="checkbox"/>	CASING/CEMENT JOB <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.

Mewbourne Oil Company requests that the following change be made to the Cabra Nino 14/11 B2MD State Com #1H (API #30-025-49267):

1. Correct dedicated acreage from 320 acres to 640 acres.

Attached is updated C102

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 John Smith TITLE Petroleum Engineer DATE 06/11/2025

Type or print name John Smith E-mail address: john.smith@mewbourne.com PHONE: 580-574-3048

For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):

Santa Fe Main Office Phone: (505) 476-3441 Fax: (55) 476-3462 General Information Phone: (505) 629-6116 Online Phone Directory Visit: https://www.emnrd.nm.gov/ocd/contact-us/	State of New Mexico Energy, Minerals & Natural Resources Department OIL CONSERVATION DIVISION	<div style="text-align: right;"> C-102 Revised July 9, 2024 Submit Electronically via OCD Permitting </div> <div> Submittal Type: <div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> <input type="checkbox"/> Initial Submittal <input checked="" type="checkbox"/> Amended Report <input type="checkbox"/> As Drilled </div> </div>
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WELL LOCATION INFORMATION

API Number 30-025-49267	Pool Code 96553	Pool Name OJO CHISO; BONE SPRING
Property Code 331325	Property Name CABRA NINO 14/11 B2MD STATE COM	Well Number 1H
OGRID No. 14744	Operator Name MEWBOURNE OIL COMPANY	Ground Level Elevation 3476'
Surface Owner: <input checked="" type="checkbox"/> State <input type="checkbox"/> Fee <input type="checkbox"/> Tribal <input type="checkbox"/> Federal		Mineral Owner: <input checked="" type="checkbox"/> State <input type="checkbox"/> Fee <input type="checkbox"/> Tribal <input type="checkbox"/> Federal

Surface Location

UL M	Section 14	Township 22S	Range 34E	Lot	Ft. from N/S 255' FSL	Ft. from E/W 1250' FWL	Latitude 32.3851599	Longitude 103.44525	County LEA
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Bottom Hole Location

UL D	Section 11	Township 22S	Range 34E	Lot	Ft. from N/S 86' FNL	Ft. from E/W 360' FWL	Latitude 32.4132402	Longitude 103.44805	County LEA
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Dedicated Acres 640	Infill or Defining Well INFILL	Defining Well API 30-025-49268	Overlapping Spacing Unit (Y/N) Y	Consolidation Code C
Order Numbers.			Well setbacks are under Common Ownership: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Kick Off Point (KOP)

UL M	Section 14	Township 22S	Range 34E	Lot	Ft. from N/S 37' FSL	Ft. from E/W 340' FWL	Latitude 32.3845634	Longitude 103.44820	County LEA
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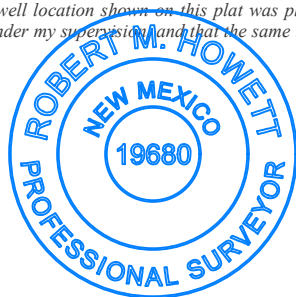
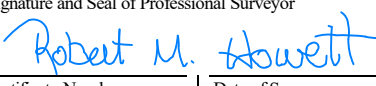
First Take Point (FTP)

UL M	Section 14	Township 22S	Range 34E	Lot	Ft. from N/S 666' FSL	Ft. from E/W 366' FWL	Latitude 32.3862906	Longitude 103.44811	County LEA
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Last Take Point (LTP)

UL D	Section 11	Township 22S	Range 34E	Lot	Ft. from N/S 107' FNL	Ft. from E/W 360' FWL	Latitude 32.4131824	Longitude 103.44805	County LEA
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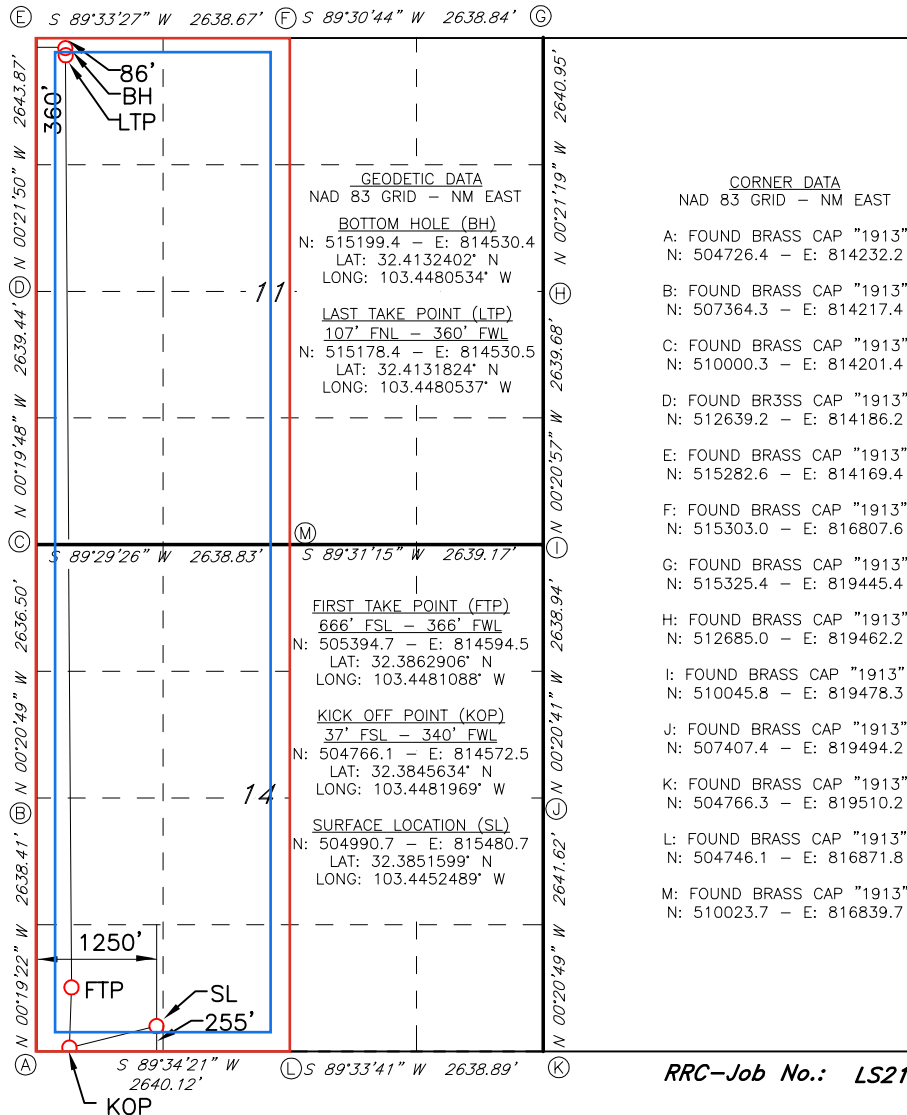
Unitized Area or Area of Uniform Interest	Spacing Unit Type <input checked="" type="checkbox"/> Horizontal <input type="checkbox"/> Vertical	Ground Floor Elevation: 3504'
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OPERATOR CERTIFICATIONS <i>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and, if the well is a vertical or directional well, that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of a working interest or unleased mineral interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.</i> <i>If this well is a horizontal well, I further certify that this organization has received the consent of at least one lessee or owner of a working interest or unleased mineral interest in each tract (in the target pool or formation) in which any part of the well's completed interval will be located or obtained a compulsory pooling order from the division.</i> <div style="display: flex; justify-content: space-between;"> <div>  Signature </div> <div> 05/05/2025 Date </div> </div> <div style="border-top: 1px solid black; padding-top: 5px;"> John Smith Printed Name </div> <div style="border-top: 1px solid black; padding-top: 5px;"> john.smith@mewbourne.com Email Address </div>	SURVEYOR CERTIFICATIONS <i>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision and that the same is true and correct to the best of my belief.</i> <div style="text-align: center;">  </div> <div style="display: flex; justify-content: space-between;"> <div> Signature and Seal of Professional Surveyor  Certificate Number 19680 </div> <div> Date of Survey 11/4/2021 </div> </div>
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Note: No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

This grid represents a standard section. You may superimpose a non-standard section, or larger area, over this grid. Operators must outline the dedicated acreage in a red box, clearly show the well surface location and bottom hole location, if it is directionally drilled, with the dimensions from the section lines in the cardinal directions. If this is a horizontal wellbore show on this plat the location of the First Take Point and Last Take Point, and the point within the Completed interval (other than the First Take Point or Last Take Point) that is closest to any outer boundary of the tract.

Surveyors shall use the latest United States government survey or dependent resurvey. Well locations will be in reference to the New Mexico Principal Meridian. If the land is not surveyed, contact the OCD Engineering Bureau. Independent subdivision surveys will not be acceptable.



RRC-Job No.: LS21050537AD

Sante Fe Main Office
Phone: (505) 476-3441

General Information
Phone: (505) 629-6116

Online Phone Directory
<https://www.emnrd.nm.gov/ocd/contact-us>

State of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

CONDITIONS

Action 473047

CONDITIONS

Operator: MEWBOURNE OIL CO P.O. Box 5270 Hobbs, NM 88241	OGRID: 14744
	Action Number: 473047
	Action Type: [C-103] NOI Change of Plans (C-103A)

CONDITIONS

Created By	Condition	Condition Date
matthew.gomez	Any previous COA's not addressed within the updated COA's still apply.	8/12/2025