

REFERENCE SHEET FOR
UNDESIGNATED WELLS

	Fm	Pm	N	Pc
17-21 C	XX	XX	XX	

paragraph

1. Date:	3/5/2013
2. Type of Well:	
Oil:	XX
Gas:	
3. County:	LEA

4. Operator:	MEWBOURNE OIL CO							API NUMBER:	30 - 025 - 40836		
5. Address of Operator	PO BOX 5270 HOBBS NM 88241										
6. Lease name or Unit Agreement Name	>> MERIT 32 DM STATE COM							7. Well Number	# - 1H		
8. Well Location	FTG N/S	-N/S	FTG E/W	-E/W	SEC	TWN	RNG	TD	14946		
SLOC	D	245	N	330	W	32	18S	35E			
BHLOC	M	339	S	375	W	32	18S	35E	PBTD	14933	
9. Completion Date:	1/11/2013							11. Pens	TOP 10863		
10. Name of Producing Formation(s)	BONE SPRING							12. Open Hole	TOP		
13. C-123 Filed:	Date	15. Name of Pool Requested or temporary Wildcat designation:							Pool ID num		
Y	N	XX	SCHAR;BONE SPRING							55610	
16. Remarks:	EXTEND										

TO BE COMPLETED BY DISTRICT GEOLOGIST		
17. Action taken	18. Pool Name	Pool ID num
EXTEND	SCHAR;BONE SPRING	55610
<p>T 18 S, R 35 E</p> <p>SEC 32: ALL</p>		

19. Advertised for HEARING:	20. Case Number
21. Name of pool for which was advertised.	Pool ID num
SCHAR;BONE SPRING	55610
22. Placed in Pool	23. By order number
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