Submit I Copy To Appropriate District	State of New M	Aexico	F	Form C-103
Office District I – (575) 393-6161	Energy, Minerals and Natural Resources		Revised	August 1, 2011
1625 N. French Dr., Hobbs, NM 88240	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.		WELL API NO.	
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210			30-025-420025. Indicate Type of Lease	
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410			$STATE \square FEE$	
<u>District IV</u> - (505) 476-3460	Santa Fe, NM	87505	6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505			VB-1831-0002	
SUNDRY NOTICE	ES AND REPORTS ON WELI		7. Lease Name or Unit Agree	ment Name
(DO NOT USE THIS FORM FOR PROPOSAL DIFFERENT RESERVOIR. USE "APPLICAT			Cabra Loca 11 B3OB State	/
PROPOSALS.)		HOBBS OCD	8. Well Number 1H	
	as Well 🗌 Other			
2. Name of Operator Mewbourne Oil Company	(SEP 1 0 2014	9. OGRID Number 14744	
3. Address of Operator			10. Pool name or Wildcat	
PO Box 5270, Hobbs, New Mexico			Ojo Chiso; Bone Spring 965	53
4. Well Location	•·· · · · · · · · · · · · · · · · · · ·	RECEIVED		
Unit Letter _0:20	0feet from theSouth	line and _2150	feet from the _East	line
Section 11	Township 22S	Range 34E	NMPM Lea Cou	inty /
	11. Elevation (Show whether D	R, RKB, RT, GR, etc.)	
	3500' GL		- Standards	
12 Check An	propriate Box to Indicate	Nature of Notice	Report or Other Data	
	• •			
NOTICE OF INTE			SEQUENT REPORT OF	۱ ۱
—	PLUG AND ABANDON			
	CHANGE PLANS	COMMENCE DR CASING/CEMEN		Ш.
			I JOB 🛛	
OTHER:		OTHER:		
13. Describe proposed or complete				
proposed completion or recom		AC. For Muniple Co	mpletions: Attach wellbore diag	ram of
1 - F	F			
08/31/14MI & spud 17 ½" hole. TD'd sks Lite Class C (35:65:6) w/additives.				
Plug down @ 7:00 PM 09/05/14. Circ	120 sks cement to the pit. WC	C 18 hrs. At 4:45 PM	A 09/06/14, tested BOPE & csg t	#/g w/1.55 yu.
30 minutes, held OK. Drilled out with	12 ¼" bit.			0 12000 101
Spud Date: 08/31/2014	Rig Rele	ease Date:		
Though control that the information of				
I hereby certify that the information abo	ove is true and complete to the	best of my knowledg	e and belief.	
- ·				
SIGNATURE J	Eathan TITLE_Hob	bs Regulatory	DATE_09/08/14	
Type or print name Jackie Lathan	3		ne.com PHONE: _575-393	3-5905
For State Use Only	/···			
	P P	etroleum Enginee		aliplan
APPROVED BY:Conditions of Approval (iFany):	TITLE TITLE		а т Date 0 9	110114
Conditions of Approval (Peany).	r			
				• •
			AA	8 84
			SEP 2 3 2014	- / "

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