

HOBBS OGD
JUN 27 2016
RECEIVED

CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.

30-025-40162

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Red Hills West SWD

8. Well Number

1

9. OGRID Number

14744

10. Pool name or Wildcat

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 SWD

2. Name of Operator

Mewbourne Oil Company

3. Address of Operator

PO Box 5270, Hobbs, NM 88241

4. Well Location

Unit Letter P : 700 feet from the South line and 690 feet from the East line

Section 16

Township 26S

Range 32E

NMPM

Lea

County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

3166'

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐PLUG AND ABANDON ☐TEMPORARILY ABANDON ☐CHANGE PLANS ☐PULL OR ALTER CASING ☐MULTIPLE COMPL ☐DOWNHOLE COMMINGLE ☐CLOSED-LOOP SYSTEM ☐OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ALTERING CASING ☐COMMENCE DRILLING OPNS. ☐P AND A ☐CASING/CEMENT JOB ☐OTHER: MIT ☒

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.

MIRU pump truck. Loaded csg w/2 BFW & performed MIT to 500#, held OK (George Bower w/NMOCD witnessed). RDMO pump truck. SWI.

Chart & Bradenhead test report attached.

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

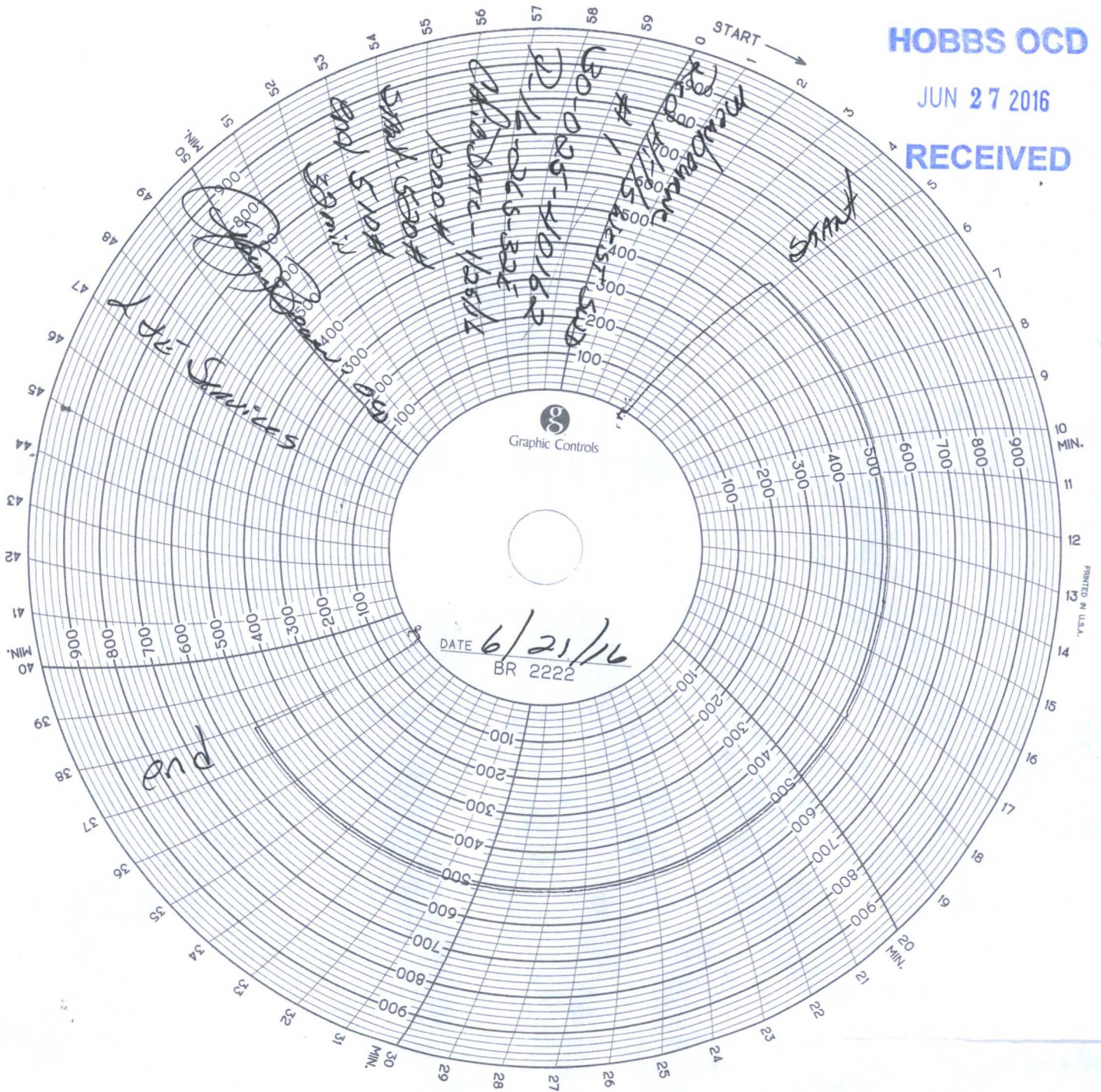
SIGNATURE Jackie Lathan TITLE Regulatory DATE 06/22/16Type or print name Jackie Lathan E-mail address: jlathan@mewbourne.com PHONE: 575-393-5905**For State Use Only**APPROVED BY: George Bower TITLE Compliance Officer DATE 7/1/16

Conditions of Approval (if any):

HOBBS OCD

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START - 520#
END - 510#

amb

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State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name <i>mcwhorter</i>	API Number <i>30-025-40162</i>
Property Name <i>Red Hills West SWD</i>	Well No. <i>1</i>

7. Surface Location

UL - Lot <i>P</i>	Section <i>16</i>	Township <i>26S</i>	Range <i>32E</i>	Feet from <i>700</i>	N/S Line <i>S</i>	Feet From <i>690</i>	E/W Line <i>E</i>	County <i>LCA</i>
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Well Status

TA'D WELL YES	NO	YES	SHUT-IN NO	INJ	INJECTOR <i>SWD</i>	OIL	PRODUCER GAS	DATE <i>6/21/16</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csng	(E)Tubing
Pressure	<i>φ</i>	<i>NA</i>	<i>NA</i>	<i>φ</i>	<i>φ</i>
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 —
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR —
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS —
Down to nothing	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Type of Fluid
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Injected for
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Waterflood if applies.

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Signature:	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS
Title:	Re-test
E-mail Address:	
Date: <i>6/21/16</i>	
Phone:	
Witness: <i>[Signature]</i>	