Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
District I – (575) 393-6161	Energy, Minerals and Natural Resource	Revised August 1, 2011
1625 N. French Dr., Hobbs M 83240 E N. District II – (575) 748-1283		WELL API NO.
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	30-025-43361 5. Indicate Type of Lease
District III - (505) 334-60707	1220 South St. Francis Dr.	STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis <b>Sant</b> F <b>348</b>		o. State on & das Lease 110.
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A		7. Lease Name or Unit Agreement Name Salado Draw 10 W1DM Fee
	TION FOR PERMIT" (FORM C-101) FOR SUCH	Salado Biaw 10 W IBW 100
PROPOSALS.)		8. Well Number 2H
	as Well 🛛 Other	( 0 0000000
2. Name of Operator		9. OGRID Number
Mewbourne Oil Company  3. Address of Operator		14744 10. Pool name or Wildcat
PO Box 5270, Hobbs, NM 88241		Red Hills; Wolfcamp (Gas) 83600
		Red Tillis, Wolfcamp (Gas) 83000
4. Well Location		
	310feet from the _North line and	
Section 10	Township 26S Range 33E	NMPM Lea County
	11. Elevation (Show whether DR, RKB, RT, G.	R, etc.)
	3330'	
DOWNHOLE COMMINGLE		EMENT JOB 🛛
OTHER:	OTHER:	
of starting any proposed work proposed completion or recom	). SEE RULE 19.15.7.14 NMAC. For Multipapletion.	ils, and give pertinent dates, including estimated date le Completions: Attach wellbore diagram of l. Cmt w/250 sks Lite Class C (60:40:0) w/additives.
		sting out of liner. Displaced 7" csg w/BW. Circ 53
	U 11" x 5k# x 7 1/6" 10k# tbg spool w/capping	g flange. Tested tbg spool pack-off to 3500#.
		T.O.L 10995 B.O.L. 15943
		T.O.L 1-043
		B.O.L. 13.44
Spud Date: 08/15/2016	Rig Release Date: 09/10	/16
Spud Date: 06/13/2010	Rig Release Date. 09/10	10
I hereby certify that the information ab	ove is true and complete to the best of my kno	wledge and helief
Thereby certify that the information abo	ove is true and complete to the best of my kno	wiedge and belief.
	$\sim$ 10 $\sim$	
SIGNATURE DOSLE	TITLE Regulatory	DATE_09/21/16
Type or print name _Nackie Lathan	E-mail address: jlathan@mev	bourne.com PHONE: 575-393-5905
For State Use Only		
APPROVED BY:	TITLE	n Engineer DATE 09/23/16
	IIILE	DATE VIII
Conditions of Approval (if any):		