Submit 1 Copy To Appropriate District	State of New Mexico		Form C-103
Office	HO Energy, Minerals and Natural Resources		Revised August 1, 2011
District 2 (3) 93-6161 1625 N. French Dr., Hobbs, NM 88240			WELL API NO.
District II – (575) 748-1283	MAROJIC CONSERVATION DIVISION		30-025-43361
811 S. First St., Artesia, NM 88210			5. Indicate Type of Lease
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410			STATE FEE S
District IV – (505) 476-3460		6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM	,		
87505 SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			Salado Draw 10 W1DM Fee Com
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			8. Well Number 2H
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other			/
2. Name of Operator			9. OGRID Number
Mewbourne Oil Company		/	14744
3. Address of Operator			10. Pool name or Wildcat
PO Box 5270, Hobbs, NM 8824	1		Red Hills; Wolfcamp (Gas) 83600
4. Well Location			
Unit Letter D	· 310 feet from the North	line and 330	feet from the West line
Section 10 Township 26S Range 33E NMPM Lea County			
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3330'			
A HE SEAR AND A SEARCH	3330		
12 61 1	A CONTRACTOR	CNI	D O.I . D .
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK			_
TEMPORARILY ABANDON		LLING OPNS. P AND A	
PULL OR ALTER CASING		CASING/CEMEN	
DOWNHOLE COMMINGLE) MOLTIPLE COMPL	CASING/CEIVIEN	1 308
DOWNHOLE COMMINGLE	I		
OTHER: Change well name	\boxtimes	OTHER:	П
13. Describe proposed or com			d give pertinent dates, including estimated date
			mpletions: Attach wellbore diagram of
proposed completion or recompletion.			
rrr	r		
Mewbourne Oil Company has an approved APD for the above captioned well. We would like to change the name from			
Salado Draw 10 W1DM Fee Com #2H to Salado Draw 10 W0DM Fee Com #2H. FROP_ID 3/752-3			
100 100 40 111/			
Spud Date: 08/15/2016	Rig Release	Date: 09/10/16	
I hereby certify that the information	n above is true and complete to the be	est of my knowledge	e and belief.
	•		
•	8 11		
SIGNATURE	TITLE Regul	atory	DATE02/28/17
SIGNATURE Cathe Pothan TITLE Regulatory DATE 02/28/17			
Type or print name Hackie Lathan E-mail address: jlathan@mewbourne.com PHONE: 575-393-5905			
For State Use Only			1)
APPROVED BY:	TITLE	Petroleum E	ngineer DATE 03/13/17
Conditions of Approval (if any):	TITLE	1 0110101111	DATE
Conditions of Approval (II ally):			