

Submit 3 Copies To Appropriate District Office,  
District I

1625 N. French Dr., Hobbs, NM 88240

District II

1301 W. Grand Ave., Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
May 27, 2004

WELL API NO.

30-015-33425

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name  
Flacon Keys 33 State Com

8. Well Number

1

9. OGRID Number

14744

10. Pool name or Wildcat  
Crow Flats Morrow 75720

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

RECEIVED

2. Name of Operator

Mewbourne Oil Company

DEC 27 2004

3. Address of Operator

PO Box 5270 Hobbs, NM 88240

OBH-ARTESIA

4. Well Location

Unit Letter C: 660 feet from the N line and 1980 feet from the W line

Section 33 Township 16S Range 28E NMPM Eddy County

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

3549' GL

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type \_\_\_\_\_ Depth to Groundwater \_\_\_\_\_ Distance from nearest fresh water well \_\_\_\_\_ Distance from nearest surface water \_\_\_\_\_

Pit Liner Thickness: \_\_\_\_\_ mil Below-Grade Tank: Volume \_\_\_\_\_ bbls; Construction Material \_\_\_\_\_

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 ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ P AND A ☐

CASING/CEMENT JOB ☒

OTHER: ☐

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

12/08/04...MI & spud 17 1/2" hole. TD'd hole @ 509'. Ran 509' 13 3/8" 48# H40 ST&C csg. Cemented with 350 sks 35:65:6 Poz (Fly Ash) with additives. Mixed @ 12.5 #/g w/ 1.98 yd. Tail with 200 sks Class "C" with 2% CaCl2. Mixed @ 14.8 #/g w/ 1.34 yd. Circ 82 sks to pit. WOC 18 hrs. At 8:20 am, tested BOPE & Csg to 1250# for 30 minutes as required, all equipment passed. Charts and schematic attached. Drilled out with 12 1/4" bit.

12/14/04...TD'ed 12 1/4" hole @ 2016'. Ran 2016' 9 3/8" 40# N80\HCK55 LT&C Csg. Cemented with 350 sks 35:65:6 Poz (Fly Ash) Class "C" with additives. Mixed @ 12.5 /g w/ 1.96 yd. Tail with 400 sks Class "C" with 2% CaCl2. Mixed @ 14.8 #/g w/ 1.34 yd. Circ 72 sks to pit. WOC 18 hrs. At 4:15 pm, test BOPE and 9 3/8" casing to 1500# for 30 minutes as required. All equipment passed. Drilled out with 8 3/4" bit.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Kristi Green TITLE Hobbs Regulatory DATE 12/23/04

Type or print name Kristi Green

E-mail address:

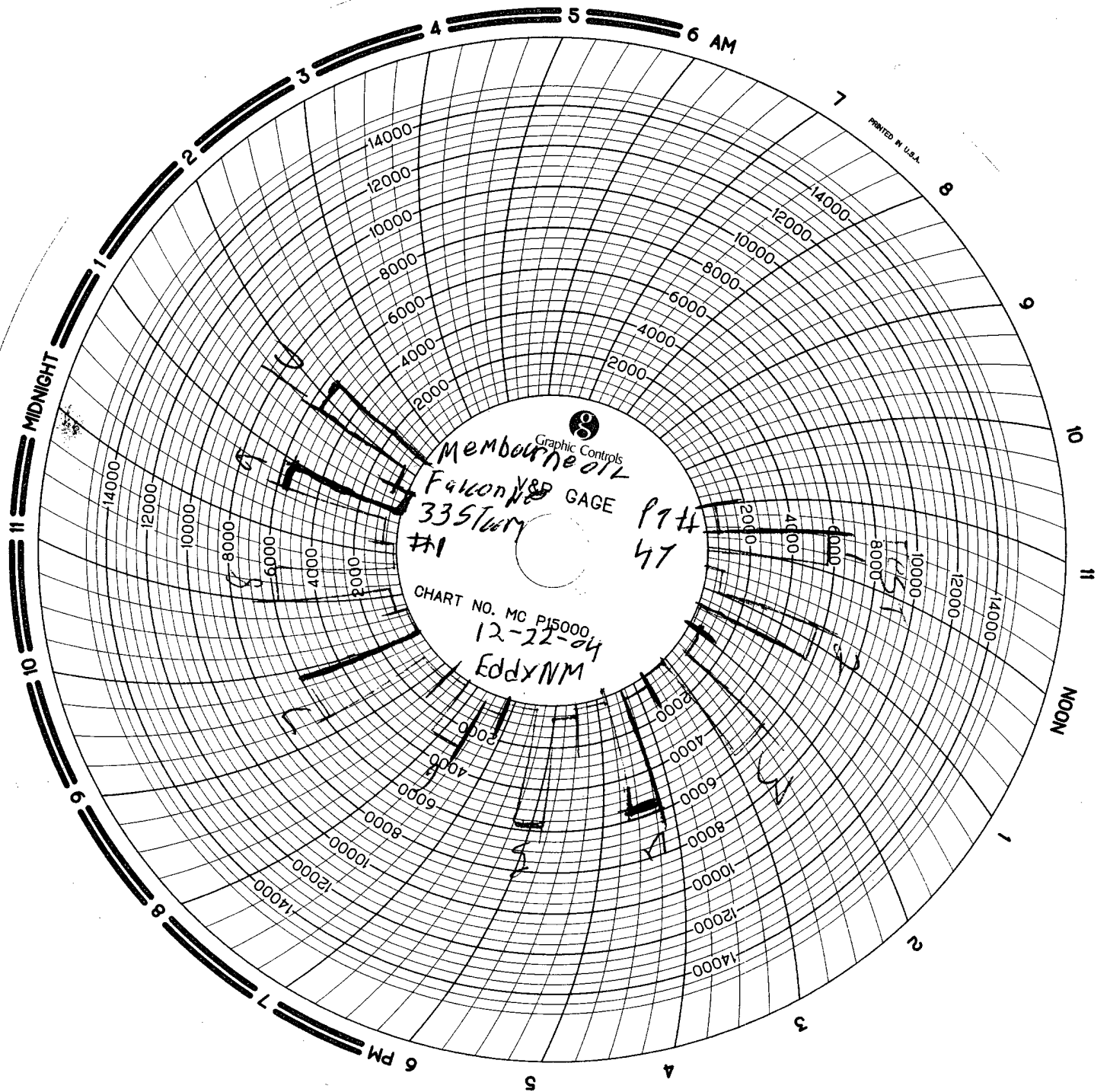
Telephone No. 505-393-5905

For State Use Only

FOR RECORDS ONLY

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE DEC 28 2004

Conditions of Approval (if any):



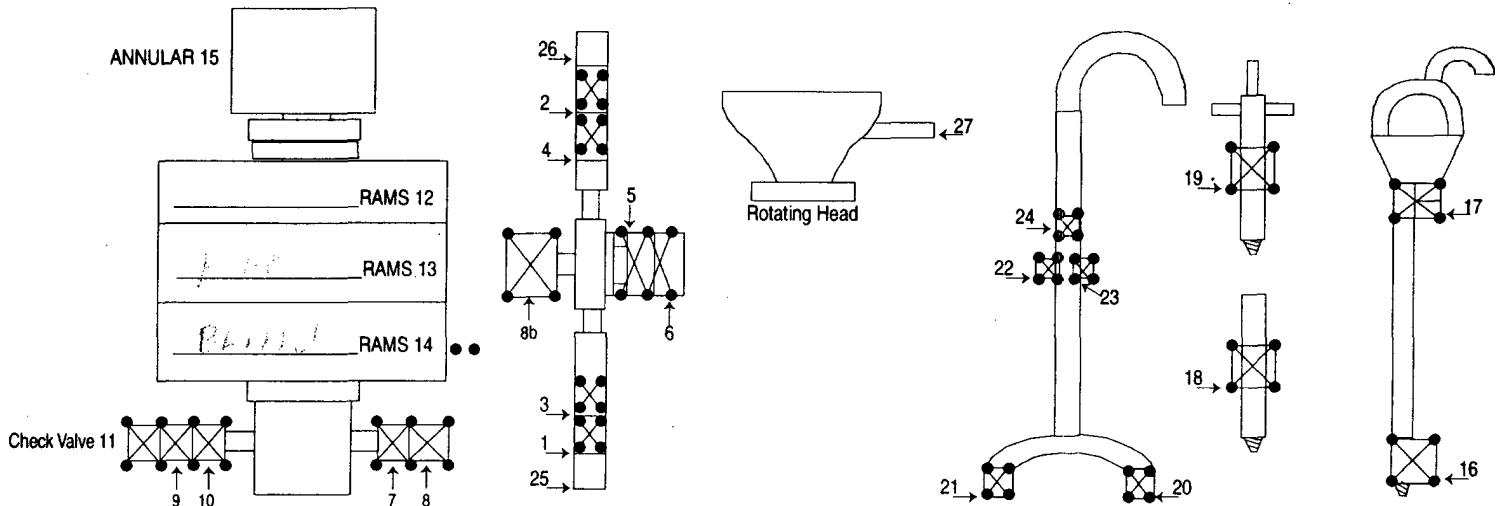
# MAN WELDING SERVICES, INC.

P.O. Box 1541 • Lovington, N.M. 88260  
BUS: 505 396-4540 • FAX: 505 396-0044



INVOICE  
# B 3170

Company MEMPHIS OIL CO Date 12-22-04 Start Time 8:00 ☒ am ☐ pm  
Lease FALCON 1015 33 STEEL #1 County EDDY State NM  
Company Man \_\_\_\_\_  
Wellhead Vender \_\_\_\_\_ Tester Jake McDougale UNIT # 11  
Drig. Contractor P97T Rig # 47  
Tool Pusher \_\_\_\_\_  
Plug Type C22 Plug Size 11" Drill Pipe Size 4 1/2 X H  
Casing Valve Opened YES Check Valve Open YES



TEST #	ITEMS TESTED	TEST LENGTH	LOW PSI	HIGH PSI	REMARKS
1	25, 26, 9, 5, 14	5=10	250	5000	
2	1, 2, 6, 10, 14	5=10	250	5000	
3	3, 4, 11, 6, 14	5=10	250	5000	
4	8, 11, 13	5=10	250	5000	
5	7, 11, 13	5=10	250	5000	
6	7, 11, 13	5=10	250	2500	
7	18	5=10	250	5000	
8	16	5=10	250	5000	
9	17	5=10	250	5000	
10	19	5=10	250	5000	

8 HR @ \$900.00  
HR @  
Mileage 100 @ 1.00

SUB TOTAL 1000  
TAX 10.375  
TOTAL 1010.375

# MAN WELDING SERVICES, INC

Company \_\_\_\_\_ Date 12-22-11  
Lease \_\_\_\_\_ County 1311  
Drilling Contractor # 47 Plug & Drill Pipe Size 11 7/8 4 1/2 XH

## Accumulator Function Test - OO&GO#2

**To Check - USABLE FLUID IN THE NITROGEN BOTTLES** (III.A.2.c.i. or ii or iii)

- Make sure all rams and annular are open and if applicable HCR is closed.
- Ensure accumulator is pumped up to working pressure! **(Shut off all pumps)**
  1. Open HCR Valve. (If applicable)
  2. Close annular.
  3. Close **all** pipe rams.
  4. Open one set of the pipe rams to simulate closing the blind ram.
  5. For 3 ram stacks, open the annular to achieve the 50+ % safety factor. (5M and greater systems).
  6. **Record remaining pressure** 2600 psi. **Test Fails if pressure is lower than required.**
    - a. {950 psi for a 1500 psi system} b. {1200 psi for a 2000 & 3000 psi system }
  7. If annular is closed, open it at this time and close HCR.

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**To Check - PRECHARGE ON BOTTLES OR SPHERICAL** (III.A.2.d.)

- Start with manifold pressure at, or above, maximum acceptable pre-charge pressure:
  - a. {800 psi for a 1500 psi system} b. {1100 psi for 2000 and 3000 psi system}
- 1. Open bleed line to the tank, slowly. **(gauge needle will drop at the lowest bottle pressure)**
  2. Close bleed line. Barely bump electric pump and see what pressure the needle jumps up to.
  3. **Record pressure drop** 1600 psi. **Test fails if pressure drops below minimum.**
- **Minimum:** a. {700 psi for a 1500 psi system } b. {900 psi for a 2000 & 3000 psi system }

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**To Check - THE CAPACITY OF THE ACCUMULATOR PUMPS** (III.A.2.f.)

- Isolate the accumulator bottles or spherical from the pumps & manifold.
- Open the bleed off valve to the tank, {manifold psi should go to 0 psi} close bleed valve.
  1. Open the HCR valve, {if applicable} ..
  2. Close annular
  3. With **pumps** only, time how long it takes to regain the required manifold pressure.
  4. **Record elapsed time** 456.6. **Test fails if it takes over 2 minutes.**
    - a. {950 psi for a 1500 psi system} b. {1200 psi for a 2000 & 3000 psi system}