Submit 3 Copies To Appropriate District Office	State of New Mexico			Form C-103		
District I	Energy, Minerals and Natural Resources			May 27, 2004 WELL API NO.		
1625 N. French Dr., Hobbs, NM 88240 District II				30-015-33425		
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION			5. Indicate Type of Lease		
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.			STATE X FE	E 🔲	
District IV	Santa Fe, NM 87505			6. State Oil & Gas Lease N	o.	
1220 S. St. Francis Dr., Santa Fe, NM 87505						
SUNDRY NOTICES AND REPORTS ON WELLS				7. Lease Name or Unit Agr	eement Name	
(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.)				Falcon Keys 33 State Com		
1. Type of Well: Oil Well	Gas Well X Other	as Well X Other RECEIVED			8. Well Number 1	
2. Name of Operator Mewbourne Oil Company		JΔ	N 2 1 2005	9. OGRID Number 14744		
3. Address of Operator		Mer	-WATERIA	10. Pool name or Wildcat		
PO Box 5270 Hobbs, NM 88240		C)C)		Crow Flats Morrow 75720		
4. Well Location		· · · · · · · · · · · · · · · · · · ·				
Unit LetterC:	660feet from the	N	line and	1980feet from the	_Wline	
Section 33 Township 16S Range 28E NMPM Eddy County						
11. Elevation (Show whether DR, RKB, RT, GR, etc.)						
Pit or Below-grade Tank Application O	3549' GL					
		arest fresh w	ater well Dist	ance from nearest surface water		
Pit typeDepth to GroundwaterDistance from nearest fresh water wellDistance 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						
				SEQUENT REPORT (DF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORL			K 🗌 ALTERIN	IG CASING □	
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRI	LLING OPNS.□ P AND A		
PULL OR ALTER CASING	MULTIPLE COMPL		CASING/CEMEN	г ЈОВ 🛛		
OTHER:		П	OTHER:	_		
13. Describe proposed or compl	leted operations. (Clearly			d give pertinent dates, includi	ng estimated date	
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion						
or recompletion.						
01/15/05TD'ed 8 3/4" hole @ 9712						
additives. Mixed @ 13.2 #/g w/ 1.63 cf/sk yd. Tailed w/ 500 sks Class 'H' w/ additives. Mixed @ 15.1 #/g w/ 1.28 cf/sk yd. Displaced with 2% KCl. Lift pressure at 2200# at 3 BPM. At 12:30 pm, tested 5 1/2" casing to 2500# for 30 minutes, held						
OK.	Lift pressure at 2200# at	3 BPM. A	t 12:30 pm, tested :	5 1/2" casing to 2500# for 30	minutes, neia	
01/15/05Released rig at 11:00 pm.						
01/20/05Ran CBL, CCL and Gamr	na Rav & found TOC @	6614'				
,	,					
I hereby certify that the information	above is true and comple	te to the be	st of my knowledg	e and belief. I further certify the	at any pit or below-	
grade tank has been/will be constructed or	closed according to NMOCD	guidelines L	」, a general permit ∐	or an (attached) alternative OCD-	approved plan ∐.	
SIGNATURE TOUTE	gue.	TITLE_Hobbs Regulatory			1/20/05	
Type or print name Kristi Green	٧	E-m	nail address:	Telephone N	o. 505-393-5905	
For State Use Only	TIM W. GUM	2 11		1 diophone 14	1. 202 272 2703	
ADDDOVED DV.	RICT II SUPERVI	ROB		_ JAN	2 4 2005	
APPROVED BY: DIST Conditions of Approval (if any):	THO! I SUFERN	HMTE		DATE_		