

Submit 1 Copy To Appropriate District Office  
 District I - (575) 393-6161  
 1625 N. French Dr., Hobbs, NM 88240  
 District II - (575) 748-1283  
 811 S. First St., Artesia, NM 88210  
 District III - (505) 334-6178  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV - (505) 476-3460  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 Revised July 18, 2013

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

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. 30-015-41163
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Mewbourne Oil Company		6. State Oil & Gas Lease No.
3. Address of Operator PO Box 5270, Hobbs NM 88241		7. Lease Name or Unit Agreement Name Salt Draw 2 CN Fee
4. Well Location Unit Letter <u>C</u> : <u>155</u> feet from the <u>North</u> line and <u>2170</u> feet from the <u>West</u> line Section <u>2</u> Township <u>25S</u> Range <u>28E</u> NMPM Eddy County		8. Well Number 1H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2968'		9. OGRID Number 14744
		10. Pool name or Wildcat San Lorenzo; Bone Spring, North 53610

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

<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>		<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: Completion sundry <input checked="" type="checkbox"/>	
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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.

09/19/13 Frac Bone Spring Ports from 8746' MD to 12751 MD in 20 stages w/399,335 gals Slickwater, 290,571 gals 20# Linear gel, 818,465 20# XL gel carrying 92,111# 100 Mesh, 1,668,590# 20/40 sand & 345,579# 20/40 SB Excel sand. Flowback well for cleanup.

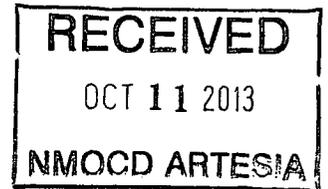
09/23/13 Put well on production.

10/04/13 RIH w/2 7/8" tbg & GLV's to 7882'. Set pkr @ 7778'.

*grade weight of tubing*

Spud Date: 08/04/2013

Rig Release Date: 08/27/2013



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 10/10/13

Type or print name Jackie Lathan E-mail address: jlathan@mewbourne.com PHONE: 575-393-5905

**For State Use Only**

APPROVED BY: RDade TITLE District Supervisor DATE 10/11/2013  
 Conditions of Approval (if any):