

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

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.)		WELL API NO. 30-015-44263
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input 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 Fleetwood 36/25 W0ML State Com
4. Well Location Unit Letter <u> M </u> :185 <u> </u> feet from the <u> South </u> line and <u> 750 </u> feet from the <u> West </u> line Section <u> 36 </u> Township <u> 24S </u> Range <u> 28E </u> NMPM Eddy County		8. Well Number <u> 3H </u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2944' GL		9. OGRID Number <u> 14744 </u>
		10. Pool name or Wildcat Purple Sage; Wolfcamp, (Gas)

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

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

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.

09/04/18

TD'd 8 3/4" hole @ 9940'. Ran 9925' of 7" 29# HCP110 LT&C Csg. Cemented lead w/300 sks Class C w/additives. Mixed @ 10.0#/g w/3.20 yd. Tail w/400 sks Class H w/additives. Mixed @ 14.2#/g w/1.26 yd. Displaced w/367 bbls OBM. Plug down @ 3:45 PM 09/05/18. Did not circ cmt. EST TOC @ 2320'. Slow rate lift pressure @ 280 psi @ 3 BPM. At 7:00 AM 09/06/18, tested csg to 1500# 30 mins, held OK. FIT test to 12.5 PPG EMW. Drilled out with 6 1/8" bit.

RECEIVED

Spud Date: 08/26/2018

Rig Release Date:

SEP 26 2018

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

DISTRICT II-ARTESIA O.C.D.

SIGNATURE Ruby Caballero TITLE Regulatory DATE 09/24/2018

Type or print name Ruby Caballero E-mail address: rcaballero@mewbourne.com PHONE: 575-393-5905
For State Use Only

APPROVED BY: Ruby K. Kline TITLE Business Operator DATE 9-27-18
Conditions of Approval (if any):