

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

RECEIVED  
 State of New Mexico  
 Energy, Minerals and Natural Resources  
 CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505  
 DISTRICT IV-ARTESIA

Form C-103  
 Revised July 18, 2013

WELL API NO. 30-015-46362	
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name Foreigner 33/4 WOKN Fee	
8. Well Number 1H	
9. OGRID Number 14744	
10. Pool name or Wildcat Purple Sage; Wolfcamp (gas)	
<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.) 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	
2. Name of Operator Mewbourne Oil Company	
3. Address of Operator PO Box 5270, Hobbs NM 88241	
4. Well Location Unit Letter <u>L</u> : <u>2450</u> feet from the <u>South</u> line and <u>1180</u> feet from the <u>West</u> line Section <u>33</u> Township <u>23S</u> Range <u>28E</u> NMPM <u>Eddy</u> County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3099' GL	

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 checked="" type="checkbox"/> OTHER: <input 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.

12/05/19

TD'ed 8 3/4" hole @ 9920'. Ran 9788' of 7" 29# HCP110 LT&C Csg. Cemented w/450 sks NeoCem Class H w/additives. Mixed @ 10.3#/g w/3.72 yd. Tail w/400 sks Class H w/additives. Mixed @ 15.6#/g w/1.19 yd. Displaced w/362 bbls OBM. Plug down @ 9:00 PM 12/05/19. Circ 101 sks of cmt to the pits. At 5:30 AM 12/07/19, tested csg to 1500# 30 mins, held OK. FIT test to 12.8 PPG EMW. Drilled out with 6 1/8" bit.

Spud Date: 11/24/2019

Rig Release Date:

VAB

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

SIGNATURE [Signature] TITLE Regulatory DATE 12/12/19

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

**For State Use Only**

APPROVED BY: [Signature] TITLE Staff Mgr DATE 12/18/19  
 Conditions of Approval (if any):