| Office  |  | of New Me     |                |                              | roini C-103  |
|---|--|---------------|----------------|------------------------------|--|
| District I  | Energy, Minerals and Natural Resources |               |                | 1                            | June 19, 2008 /<br>WELL API NO. 30-015-37122         |
| 1625 N. French Dr., Hobbs, NM 88240 District II   |  |               |                |                              | WEEL ATTIO. 30-013-37122                             |
| 1301 W. Grand Ave, Artesia, NM 88210 OIL CONSERVATION DIVISION  |  |               |                | 5. Indicate Type of Lease    |  |
| District III 1220 South St. Francis Dr. 1000 Rio Brazos Rd, Aztec, NM 87410   |  |               |                | STATE  FEE X                 |  |
| District IV Santa Fe, NM 8/505  |  |               |                | 6. State Oil & Gas Lease No. |  |
| 1220 S. St. Francis Dr., Santa Fe, NM<br>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   |  |               | UG BACK TO A   |                              | 7. Lease Name or Unit Agreement Name<br>Gunsmoke 9 K |
| PROPOSALS.)  1. Type of Well: Oil Well X Ga   | RECEIVED                               |               |                | 8. Well Number 1             |  |
| 1. Type of Well: Oil Well X Gas Well Other  2. Name of Operator   |  |               |                |                              | 9. OGRID Number                                      |
| Mewbourne Oil Company   |  | NOV 1 1 2009  |                |                              | 14744  |
| 3. Address of Operator PO Box 5270  |  |               |                |                              | 10. Pool name or Wildcat                             |
| Hobbs, NM 88241   |  | NMOCD ARTESIA |                |                              | Undesignated Yeso                                    |
| 4. Well Location  |  |               |                |                              |  |
| Unit Letter K : 1650 feet from the South line and 2310 feet from the West line  |  |               |                |                              |  |
| Section 9 Township 20S Range 25E NMPM Eddy County   |  |               |                |                              |  |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)  |  |               |                |                              |  |
| 3464'   |  |               |                |                              |  |
|   |  |               |                |                              |  |
| 12. Check Ap  | propriate Box to                       | Indicate N    | ature of Notic | e, l                         | Report or Other Data                                 |
| NOTICE OF INTENTION TO  |  |               |                |                              |  |
| NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF:  |  |               |                |                              |  |
| PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRILLING OPNS.☐ P AND A  |  |               |                |                              |  |
|   |  |               |                |                              |  |
| DOWNHOLE COMMINGLE  | MIDETIPLE COMPL                        | Ц             | CASING/CEME    | =IN I                        | JOB 🗵  |
| DOVINI 1022 00 MM 11022   |  |               |                |                              |  |
| OTHER:  |  |               | 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.  |  |               |                |                              |  |
| 10/28/09MI & spud 11" hole. Ran 814' 8 %" 24# J55 ST&C csg. Cemented with 100 sks Thixad Class H with additives. Mixed @ 14.6 #/g w/1.52 yd. Tail with 400 sks Class C with additives. Mixed @ 14.8/g w/1.34 yd. Plug down @ 11:00 am 10/29/09. Circ 40 sks to pit. WOC 18 hrs. At 3:30 am 10/30/09 tested BOPE and casing to 1500# for 30 minutes, held OK. Drilled out with 7 %" bit.   |  |               |                |                              |  |
| 11/03/09 TD'ed 7 %" hole @ 3253'. Ran 3253' 4 ½" 11.6# J55 LT&C csg. Cemented w/100 sks Thixad Class H with additives. Mixed @ 14.6 /g w/1.52 yd. Followed w/300 sks BJ Lite Class C (50:50:10) w/additives. Mixed @ 11.5#/g w/2.71 yd. Tail with 350 sks Class C with additives. Mixed @ 14.8/g w/1.33 yd. Plug down @ 3:30 pm 11/03/09. Did not circ cement. Slow rate lift pressure @ 700# @ 3 BPM. Displaced w/2% KCl water. At 3:30 pm 11/03/09, tested csg to 1500# for 30 mins, held OK. Set wellhead slips w/30k. |  |               |                |                              |  |
| 11/03/09Released rig at 9:30 pm   |  |               |                |                              |  |
| 5   |  |               |                |                              |  |
| Spud Date: 10/28/09 Rig Release Date: 11/03/09  |  |               |                |                              |  |
| I haraby partify that the infe  |  | 1-4-2-41 1    | -4 - C 1- 1    | J -                          |  |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief.  |  |               |                |                              |  |
| SIGNATURE L   | athan TI                               | TLE _Hobbs    | s Regulatory   |                              | DATE_11/10/09  |
| Tyme on wint name Teakin Lathan   |  |               |                |                              |  |
| Type or print name Jackie Lathan E-mail address: jlathan@mewbourne.com PHONE: 575-393-5905  |  |               |                |                              |  |
| For State Use Only  |  | _             |                |                              |  |
| APPROVED BY: Conditions of Approval (if any):   | TI                                     | rle <u></u>   | redopt = A     |                              | DATE 11/9/2009                                       |
| <i>i</i>  |  |               |                |                              |  |