

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

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

Form C-103
Revised March 25, 1999

WELL API NO.
30-015-33381

5. Indicate Type of Lease
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement
Name:

Tombstone 7 Federal Com

8. Well No.
#1

9. Pool name or Wildcat
Atoka, Dagger Draw SE

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.)

1. Type of Well:

Oil Well ☐ Gas Well ☒ Other ☐

2. Name of Operator

Mewbourne Oil Company 14744

3. Address of Operator

PO Box 5270 Hobbs, NM 88241

4. Well Location

Unit Letter P : 990 feet from the South line and 990 feet from the East line

Section 7 Township 20S Range 25E NMPM Eddy County

10. Elevation (Show whether DR, RKB, RT, GR, etc.)
3535' GL

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐ CHANGE PLANS ☐

PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: Isolate Morrow and frac Atoka perfs ☒

12. 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 recompilation.

Isolate Morrow perfs and frac Atoka at 8992'-9130' with 1500 gals 7 1/2% NeFe and 60,000 gals 70Q Binary Foam with 60,000# 18/40 Versaprop. Flow test. PWOL.

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

SIGNATURE Kristi Green TITLE Hobbs Regulatory DATE 08/04/05

Type or print name Kristi Green

Telephone No. 505-393-5905

(This space for State use)

APPROVED BY FOR RECORDS ONLY TITLE

DATE AUG 05 2005

Conditions of approval, if any: