Submit I Copy To Appropriate District Office	State of New Mexico	Form C-103
<u>District 1</u> – (575) 393-6161	Energy, Minerals and Natural Resources	Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240		WELL API NO.
<u>District II</u> – (575) 748-1283	OIL CONSERVATION DIVISION	30-015-36753
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178		5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATEFEE
<u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM		
87505	PIGES AND DEPORTS ON WELLS	
	FICES AND REPORTS ON WELLS OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
	JCATION FOR PERMIT" (FORM C-101) FOR SUCH	Quick Draw 15 H
PROPOSALS.)	TOTAL TOTAL ENTITY (TOTAL E TOTAL ENTITY E	8. Well Number
1. Type of Well: Oil Well	Gas Well Other	I
2. Name of Operator		9. OGRID Number
Mewbourne Oil Company	·	14744
3. Address of Operator		10. Pool name or Wildcat
PO Box 5270, Hobbs NM 88241		N. Seven Rivers Glorieta; Yeso 97565
4. Well Location		
Unit Letter_ H:		id990feet from the Eastline
Section 15	Township 20S Range 25E NMP	PM Eddy County
	11. Elevation (Show whether DR, RKB, RT, GR, e	etc.)
	3423' GL	
12 Charle	Appropriate Box to Indicate Nature of Notice	Danart or Othan Data
12. CHECK	Appropriate box to indicate Nature of Notice	se, Report of Other Data
NOTICE OF II	NTENTION TO	JBSEQUENT REPORT OF:
		-
TEMPORARILY ABANDON		DRILLING OPNS. P AND A
PULL OR ALTER CASING	-	ENT JOB L.
DOWNHOLE COMMINGLE	ļ .	•
CLOSED-LOOP SYSTEM		
OTHER		t new zone & SWI.
	pleted operations. (Clearly state all pertinent details,	
	vork). SEE RULE 19.15.7.14 NMAC. For Multiple (Completions: Attach wellbore diagram of
proposed completion or re	completion.	
Mewbourne Oil Company received	an approved application to test Grayburg formation.	
	Load & test csg to 1000#, held OK. Perforate Gray	
EHD, 60° phasing, 19 GC). RIH w	1/2 3/8" tbg. Acidized new perfs w/2000 gals 7 1/2% Ne	eFe acid.
09/23/13 to 09/26/13 Swab test we	11.	
		_
09/27/13 SWI for further evaluation	on.	PECEIVED OCT 2 8 2013 NMOCD ARTESIA
•		! NECEIVED !
		007
		UCT 2 8 2013
Spud Date:	Rig Release Date:	
		LIMOCD ARTESIA
		College
I hereby certify that the information	above is true and complete to the best of my knowle	adge and halief
Thereby certify that the information	above is true and complete to the best of my knowle	age and benef.
	. •	
SIGNATURE	TITLE Deciderary	NATE 10/24/12
SIGNATURE ALCOHOL	Fathan_TITLE Regulatory	JATE10/24/13
3 1		
	É-mail address: jlathan@mewbourne.com	_ PHONE: _3/3-393-3903
For State Use Only	_	•
ADDROVED BY All Volo	TITLE SIST A Sepenie	2
APPROVED BY:	IIILY OF CE SHOWING	DATE 10/45/13
Conditions of Approval (if any):		ı