

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

|   |  |   |
|---|--|---|
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br>(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.<br>30-015-41776  |
| 1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>  |  | 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 2. Name of Operator<br>Mewbourne Oil Company  |  | 6. State Oil & Gas Lease No.  |
| 3. Address of Operator<br>PO Box 5270, Hobbs NM 88241   |  | 7. Lease Name or Unit Agreement Name<br>Black Lake 7 MD State Com                                   |
| 4. Well Location<br>Unit Letter <u>M</u> : <u>150</u> feet from the <u>South</u> line and <u>400</u> feet from the <u>West</u> line<br>Section <u>7</u> Township <u>25S</u> Range <u>28E</u> NMPM Eddy County |  | 8. Well Number <u>1H</u>  |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>3061' GL  |  | 9. OGRID Number <u>14744</u>  |
|   |  | 10. Pool name or Wildcat<br>Hay Hollow; Bone Spring, North 30216                                    |

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

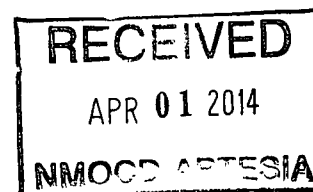
| NOTICE OF INTENTION TO:                        |   | SUBSEQUENT REPORT OF:                                 |  |
|--|---|---|--|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>                | ALTERING CASING <input 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.

03/20/14 TD'ed 6 1/8" hole @ 12650' MD. Ran 4 1/2" 13.5# P110 LT&C csg w/Baker staging tools. End of casing @ 12616.98' MD. Ran 20 stage tools w/20 pkrs & liner hanger. Top of liner @ 7951.79' MD

Spud Date: 02/27/14

Rig Release Date: 03/23/14



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

SIGNATURE Jackie Lathan TITLE Regulatory DATE 03/28/14

Type or print name Jackie Lathan E-mail address: jlathan@mewbourne.com PHONE: 575-393-5905

For State Use Only

APPROVED BY: [Signature] TITLE Dir. #Spreston DATE 4-1-2014  
Conditions of Approval (if any):