Energy   Minerals and Natural Resources	Submit I Copy To Appropriate District Office	State of New Mexico		Form C-103	
District   - (375) 748-1285   SIL 5 Heat N. Areas, NA 18316   District   - (36) 334-0178   SIL 5 Heat N. Areas, NA 18316   District   - (36) 334-0178   SIL 5 Heat N. Areas, NA 18316   District   - (36) 334-0178   SIL 5 Heat N. Areas, NA 18316   Sil 5	District 1 – (575) 393-6161	Energy, Minerals and Natural Resources			, 2013
1220 South St. Francis Dr.   Sunda Fc, NM 87505   State 1 type of Léase   STATE   FEE   Googne for this part of the property	<u>District II</u> – (575) 748-1283	OIL CONSERVATION DIVISION		30-015-42131	
Santa Fe, NM 87505   Santa F	<u>District III</u> – (505) 334-6178				
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 FERMIT" (FORM C-101) FOR SUCH PROPOSALS.)  1. Type of Well: Oil Well					
DONOTUSE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOYB. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.]  1. Type of Well: Oil Well SQ Gas Well Other				V-3615 (SL) & V-4231	
DIFFERENT RESERVOR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.   1. Type of Well: Oil Well	SUNDRY NOTICES AND REPORTS ON WELLS				ame
Type of Well: Oil Well   Gas Well   Other   1H	DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH				
Mewbourne Oil Company   14744   10. Pool name or Wildcat   PD Box 5270, Hobbs NM 88241   10. Pool name or Wildcat   Parkway; Bone Spring   14. Well Location   Unit Letter_H : 1700   feet from the North   line and 150   feet from the East   line   Section 30   Township 19S   Range 29E   NMPM   Eddy   County   11. Elevation (Show whether DR, RKB, RT, GR, etc.)   3310' GL     12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data   NOTICE OF INTENTION TO:   SUBSEQUENT REPORT OF:   REMEDIAL WORK   PLUG AND ABANDON   CHANGE PLANS   COMMENCE DRILLING OPNS   PAND A   PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB   CASING/CEMENT JOB   DOWNHOLE COMMINGLE   CLOSED-LOOP SYSTEM   OTHER:   OTHER:   OTHER:   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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.   11/13/14. MI & spud 17 ½" hole. TD'd hole @ 305'. Ran 305' of 13 ¾" 48 H40 ST&C csg. Cemented with 180 sks RFC Class C w/additives. Mixed @ 14.4 ½ w/ 1.61 yd. Tail with 350 sks Class C w/2% CaCl2. Mixed @ 14.8 #/g w/ 1.34 yd. Plug down @ 10:15 PM 11/13/14. Circ 41 sks of cmt to the pit. At 5:00 PM 11/14/14, tested BOPE & csg to 1250# for 30 minutes, held OK. Drilled out with 12 ½" bit.   NM OIL CONSERVATION ARTESIA DISTRICT   NÜ V 2 4 2014   Spud Date:   11/13/14   Rig Release Date:   RECEIVED   Receiv					
3. Address of Operator PO Box 5270, Hobbs NM 88241  4. Well Location Unit Letter_H: 1700 feet from the North line and150 feet from the _East line Section 30	2. Name of Operator				
Parkway; Bone Spring					
Unit Letter _H : 1700   feet from the North   line and _150   feet from the _East _ line   Section 30   Township 19S   Range 29E   NMPM   Eddy   County    11. Elevation (Show whether DR, RKB, RT, GR, etc.)   3310' GL    12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data    NOTICE OF INTENTION TO:   SUBSEQUENT REPORT OF:   REMEDIAL WORK   PLUG AND ABANDON   CHANGE PLANS   COMMENCE DRILLING OPNS   PAND A   PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB   CASING/CEMENT JOB   DOWNHOLE COMMINGLE   CLOSED-LOOP SYSTEM   OTHER:   OTHER:   OTHER:   OTHER:   OTHER:   OTHER:   OTHER:   OTHER CASING   Attach wellbore diagram of proposed completion or recompletion.   SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.   STANDARD   PROPERTY   STANDARD   PROPERTY   PAND A   OTHER	•				
Section 30 Township 198 Range 29E NMPM Eddy County  11. Elevation (Show whether DR, RKB, RT, GR, etc.)  3310' GL  12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data  NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON CHANGE PLUG COMMENCE DRILLING OPNS. PAND A CASING/CEMENT JOB CASING/CEMENT					
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NOTICE OF INTENTION TO:    SUBSEQUENT REPORT OF:	11.	Elevation (Show whether DR		NMPM Eddy County	
NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CASING   TEMPORARILY ABANDON   CHANGE PLANS   COMMENCE DRILLING OPNS.   P AND A DOWNHOLE COMMINGLE   CASING/CEMENT JOB   CASING/CEMENT JOB   CASING/CEMENT JOB   DOWNHOLE COMMINGLE   COMMENCE DRILLING OPNS.   P AND A DOWNHOLE COMMINGLE   COMMENCE DRILLING OPNS.   P AND A DOWNHOLE COMMINGLE   COMMENCE DRILLING OPNS.   P AND A DOWNHOLE COMMINGLE   CASING/CEMENT JOB   CASING	33	10' GL	<u> </u>		
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TEMPORARILY ABANDON					~ F
PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB   DOWNHOLE COMMINGLE   CLOSED-LOOP SYSTEM   OTHER:   OTHER:   OTHER:   OTHER:   CASING/CEMENT JOB   OTHER:   OTHER:	<del></del>			<del>_</del>	<i>i</i> ∐ ∈
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Spud Date: 11/13/14 Rig Release Date: RECEIVED		n. 71 3.00 FW FF 147 14, teste	d Bor E & esg to 125	on for 50 minutes, new OK. Difficult	Jut
Spud Date: 11/13/14 Rig Release Date:				NM OIL CONSERVATION	N
Spud Date: 11/13/14 Rig Release Date: RECEIVED					
RECEIVED	Snud Date: 11/13/14	Rig Release Date:		110 V 2 4 2014	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	Space 11/15/14	Rig Release Date.	•	RECEIVED	
	I hereby certify that the information above	e is true and complete to the b	est of my knowledge a	and belief.	
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SIGNATURE DATE 11/20/14 DATE 11/20/14	SIGNATURE JOSTIC J	Than TITLE Reg	gulatory	DATE11/20/14	
Type or print namehackie Lathan E-mail address: jlathan@mewbourne.com PHONE: _575-393-5905	Type or print name _backie Lathan	E-mail address: jlath	an@mewbourne.com	PHONE: _575-393-5905	
For State Use Only	For State Use Only	$\Lambda$	71		<b>.</b> .
APPROVED BY: DATE 10/19/19  Conditions of Approval (if any):	APPROVED BY	1 10	(110)DOIN	.^ <i>IA //c / /</i>	16