

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

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.)		WELL API NO. 30-015-44869
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Mewbourne Oil Company		6. State Oil & Gas Lease No.
3. Address of Operator PO Box 5270, Hobbs NM 88240		7. Lease Name or Unit Agreement Name Boston 7 WOLI Fee
4. Well Location Unit Letter <u>L</u> : <u>1850</u> feet from the <u>South</u> and <u>500</u> feet from the <u>West</u> line Section <u>7</u> Township <u>24S</u> Range <u>28E</u> NMPM <u>Eddy</u> County		8. Well Number <u>1H</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3083' GL		9. OGRID Number 14744
10. Pool name or Wildcat Purple Sage; Wolfcamp (Gas)		10. Pool name or Wildcat Purple Sage; Wolfcamp (Gas)

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input checked="" type="checkbox"/> OTHER: <input type="checkbox"/>	
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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.

09/27/2018 TD'ed 6 1/8" hole @ 14235' MD. Ran 14185' of 4 1/2" 13.5# HCP110 CDC-HTQ csg. Cmt w/275 sks Class C (60:40:0) w/additives. Mixed @ 11.5#/g w/2.59 yd. Released dart. Displaced w/167 bbls BW. Plug down @ 9:00 A.M. 09/29/18. Bump plug w/2300#. Set packer w/80k#. Displaced 7" csg w/240 bbls BW. Circ 162 sks of cmt off of liner top to the pit. At 10:00 A.M., 09/29/18, tested liner to 1500# for 30 mins, held OK. Top of liner @ 8941'

Rig released @ 2:30 PM

Spud Date: 08/22/2018

Rig Release Date: 09/30/2018

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 10/09/18

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

For State Use Only

APPROVED BY: Rusty Klen TITLE Business Ops Mgr DATE 11-2-2018
Conditions of Approval (if any)