

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
RECEIVED
JAN 16 2019
OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505
DISTRICT II-ARTESIA O.C.D.

Form C-103
 Revised July 18, 2013

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. 30-015-44965
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Mewbourne Oil Company		6. State Oil & Gas Lease No.
3. Address of Operator PO Box 5270, Hobbs NM 88241		7. Lease Name or Unit Agreement Name Fleetwood 36/25 W0NK State Com
4. Well Location Unit Letter <u> </u> N <u> </u> :270 <u> </u> feet from the <u> </u> South <u> </u> line and <u> </u> 1750 <u> </u> feet from the <u> </u> West <u> </u> line Section <u> </u> 36 <u> </u> Township <u> </u> 24S <u> </u> Range <u> </u> 28E <u> </u> NMPM <u> </u> Eddy <u> </u> County		8. Well Number <u> </u> 1H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2945' GL		9. OGRID Number <u> </u> 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.

12/22/2018

TD'ed 6 1/8" hole @ 17020' MD. Ran 16975' of 4 1/2" 13.5# HCP110 BPN csg. Cmt w/425 sks Class H (50:50:10) w/additives. Mixed @ 11.9#/g w/2.49 yd. Released dart. Displaced w/217 bbls BW. Plug down @ 1:00 A.M. 12/24/18. Bump plug w/4500#. Set packer w/40k#. & release from liner. Displaced 7" csg w/220 bbls BW. Circ 67 sks of cmt off of liner top to the pit. At 2:15 A.M., 12/24/18, test liner top to 2500# for 30 mins, held OK. Top of liner @ 9107'

Rig released on 12/25/18 @ 11:30 AM

Spud Date: 12/03/2018

Rig Release Date: 12/25/2018

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

SIGNATURE Ruby Caballero TITLE Regulatory DATE 1/10/2019

Type or print name Ruby Caballero E-mail address: rcaballero@mewbourne.com PHONE: 575-393-5905

For State Use Only

APPROVED BY: [Signature] TITLE Staff Mgr DATE 1/16/19
 Conditions of Approval (if any):

ENTERED
[Signature]