

Submit To Appropriate District Office State Lease - 6 copies Fee Lease - 5 copies <u>District I</u> 1625 N French Dr , Hobbs, NM 88240 <u>District II</u> 1301 W. Grand Avenue, Artesia, NM 88210 <u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM 87505	<b>State of New Mexico</b> <b>Energy, Minerals and Natural Resources</b>  <b>Oil Conservation Division</b> <b>1220 South St. Francis Dr.</b> <b>Santa Fe, NM 87505</b>	<b>Form C-105</b> Revised June 10, 2003  WELL API NO. 30-015-35368  5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>  State Oil & Gas Lease No. NM-34247
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**WELL COMPLETION OR RECOMPLETION REPORT AND LOG**

1a. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> DRY <input type="checkbox"/> OTHER _____		<div style="transform: rotate(-15deg); font-weight: bold; font-size: 1.2em;">FEB 27 2008</div> <div style="transform: rotate(-15deg); font-weight: bold; font-size: 1.2em;">OCD-ARTESIA</div>					
b. Type of Completion: NEW WORK <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG <input type="checkbox"/> DIFF. _____ WELL OVER _____ BACK _____ RESVR. <input checked="" type="checkbox"/> OTHER _____							
2. Name of Operator Mewbourne Oil Company 14744							
3. Address of Operator PO Box 5270 Hobbs, NM 88240		8. Well No. 1					
4. Well Location Unit Letter <u>  O  </u> : <u>  900  </u> Feet From The <u>  South  </u> Line and <u>  1650  </u> Feet From The <u>  East  </u> Line  Section <u>  28  </u> Township <u>  22S  </u> Range <u>  26E  </u> NMPM <u>  Eddy  </u> County		9. Pool name or Wildcat Sheep Draw Strawn 85200					
10. Date Spud 09/02/07	11. Date T.D. Reached 10/14/07	12. Date Comp (Ready to Prod) 02/19/08	13. Elevations (DF& RKB, RT, GR, etc.) 3273' GL	14. Elev. Casinghead 3273' GL			
15. Total Depth 11750'	16. Plug Back T.D. 10705'	17. If Multiple Compl. How Many Zones? NA	18. Intervals Drilled By Rotary Tools Yes Cable Tools _____				
19. Producing Interval(s), of this completion - Top, Bottom, Name 10522' to 10530 Strawn				20. Was Directional Survey Made No			
21. Type Electric and Other Logs Run				22. Was Well Cored No			
<b>23. CASING RECORD (Report all strings set in well)</b>							
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED		
13 3/8"	48#	665'	17 1/2"	780	surface		
9 5/8"	40#	2455'	12 1/4"	1280	surface		
5 1/2"	17#	11750'	8 3/4"	2600	TOC @ 4122'		
<b>24. LINER RECORD</b>			<b>25. TUBING RECORD</b>				
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET
					2 7/8"	10440'	10400'
26. Perforation record (interval, size, and number)  10522'-10530' (8', 17 holes, 2 SPF, 0.24" EHD)				27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. DEPTH INTERVAL      AMOUNT AND KIND MATERIAL USED  			
<b>28. PRODUCTION</b>							
Date First Production 02/19/08		Production Method ( <i>Flowing, gas lift, pumping - Size and type pump</i> ) flowing			Well Status ( <i>Prod. or Shut-in</i> ) producing		
Date of Test 02/21/08	Hours Tested 24	Choke Size 48/64	Prod'n For Test Period 24	Oil - Bbl 0	Gas - MCF 1663	Water - Bbl. 9	Gas - Oil Ratio 1663000
Flow Tubing Press 400#	Casing Pressure 0	Calculated 24-Hour Rate	Oil - Bbl. 0	Gas - MCF 1663	Water - Bbl 9	Oil Gravity - API - ( <i>Corr</i> ) N/A	
29. Disposition of Gas ( <i>Sold, used for fuel, vented, etc</i> ) Sold						Test Witnessed By Charles Martin	
30. List Attachments C104							
31. I hereby certify that the information shown on both sides of this form as true and complete to the best of my knowledge and belief							
Signature <i>Jackie Lathan</i>		Printed Name Jackie Lathan		Title Hobbs Regulatory		Date 02/25/08	
E-mail Address jlathan@mewbourne.com							

# INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well. It shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, items 25 through 29 shall be reported for each zone. The form is to be filed in quintuplicate except on state land, where six copies are required. See Rule 1105.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico		Northwestern New Mexico	
T. Capitan Reef	T. Canyon 9914	T. Ojo Alamo	T. Penn. "B"
T. Salt	T. Strawn 10074	T. Kirtland-Fruitland	T. Penn. "C"
B. Salt	T. Atoka 10572	T. Pictured Cliffs	T. Penn. "D"
Lamar Limestone	T. Miss (Austin)	T. Cliff House	T. Leadville
T. Rustler	T. Devonian	T. Menefee	T. Madison
T. Yates	T. Silurian	T. Point Lookout	T. Elbert
T. Queen	T. Montoya	T. Mancos	T. McCracken
T. Seven Rivers	T. Simpson	T. Gallup	T. Ignacio Otzte
T. San Andres	T. McKee	Base Greenhorn	T. Granite
T. Paddock	T. Ellenburger	T. Dakota	T.
T. Blinbry	T. Gr. Wash	T. Morrison	T.
T. Tubb	T. Delaware Sand 2522	T. Todilto	T.
T. Drinkard	T. Bone Springs 4884	T. Entrada	T.
T. Abo	T. Morrow 10874	T. Wingate	T.
T. Wolfcamp 8518	T. Barnett 11616	T. Chinle	T.
T. Pennrose	T.	T. Permian	T.
T. Cisco (Bough C)	T.	T. Penn "A"	T.

## OIL OR GAS SANDS OR ZONES

No. 1, from.....to.....

No. 2, from.....to.....

No. 3, from.....to.....

No. 4, from.....to.....

## IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from.....to.....feet.....  
 No. 2, from.....to.....feet.....  
 No. 3, from.....to.....feet.....

## LITHOLOGY RECORD (Attach additional sheet if necessary)

From	To	Thickness In Feet	Lithology

From	To	Thickness In Feet	Lithology