Submit 3 Copies To Appropriate District	State of New Mexico		Form C-103
Office District I	Energy, Minerals and Natural Resources		May 27, 2004
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.
<u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-015-25181
District III	1220 South St. Francis Dr.		5. Indicate Type of Lease STATE ☐ FEE X
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505		6. State Oil & Gas Lease No.
1220 S. St. Francis Dr , Santa Fe, NM 87505	0 S. St. Francis Dr, Santa Fe, NM		o. State on & das Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			Quick Draw 10
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			8. Well Number
1. Type of Well: Oil Well X Gas Well Other		2	
2. Name of Operator	11.11	-9 2008	9. OGRID Number
Mewbourne Oil Company			14744
3. Address of Operator	OCD-ARTESIA		10. Pool name or Wildcat
PO Box 5270 Hobbs, NM 88241			Undesignated Yeso
4. Well Location			
Unit Letter B: 660 feet from the N line and 1980 feet from the E line			
Section 10 Township 20S Range 25E NMPM Eddy County			
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3404' GL			
Pit or Below-grade Tank Application □ or Closure □			
Pit type Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water			
Pit Liner Thickness: mil Below-Grade Tank: Volumebbls; Construction Material			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBSEQU			SEQUENT REPORT OF:
ERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR			
<u> </u>	CHANGE PLANS COMMENCE DRI		_
			_
PULL OR ALTER CASING			TJOB
OTHER:		OTHER: X	
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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.			
The above captioned well was permitted as a State well with no lease number & as a gas well. MOC would like to clarify the paperwork that this is a FEE lease and an Oil well.			
If you have any questions please call Mickey Young (575) 393-5905.			
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or belowgrade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan.			
SIGNATURE	Lathan TITLE	Johns Pagulatory	DATE 06/24/08
SIGNATURE A	TILE I	10003 Regulatory	DATE_00/24/00
Type or print name Jackie Lathan For State Use Only	E-mail a	ldress:	DATE06/24/08 Telephone No. 575-393-5905
ADDDOVED DV.	יין יייניין די		DATE
APPROVED BY:Conditions of Approval (if any):	TITLE_		DATE
conditions of rippioval (if any).			