

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.  
30-015-26333

5. Indicate Type of Lease  
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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 RECEIVED  
(FORM C-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name

GIN

1. Type of Well:

OIL  
WELL ☐

GAS  
WELL ☒

OTHER ☒

JUN 19 '90

2. Name of Operator

Mewbourne Oil Company

8. Well No.

1

3. Address of Operator

P. O. Box 7698, Tyler, Texas 75711

G. C. D.

ARTESIA, OFFICE

9. Pool name or Wildcat

West Atoka - Morrow

4. Well Location

Unit Letter M : 660 Feet From The West Line and 990 Feet From The South Line

Section 9 Township 18S Range 26E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3380' GR

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: Drillstem Test ☐

12. 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.

5/27/90 - DST #1 - Strawn Formation 8369-8382'. 13' test interval. On bottom with test tools at 8:00 PM 5/26/90. Top of packer at 8370'. Bottom of packer at 8376'.

Recovery: 125' of drilling fluid. Chlorides 100,000. RW .062 at 60° F.

Sample Chamber: 1800 cc drlg fluid, 0 psi, 0 cuft, Chlorides 100,000. RW .062 at 60° F. BHT 141° at 8358'.

IHP 4098#. IFP 30 mins. 83#. Final preflow 63#. ISIP 60 mins. 2069#. IFFP 60 mins. 104#. Final Final Flow 83#. FSIP 120 mins. 2886#. FHP 4078#.

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

SIGNATURE

*Gaylon Thompson*

TITLE

Engr. Oprns. Secretary

DATE

6/8/90

TYPE OR PRINT NAME

Gaylon Thompson

(214) 561-2900

TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY

MIKE WILLIAMS

SUPERVISOR, DISTRICT II

APPROVED BY

TITLE

DATE

JUN 26 1990

CONDITIONS OF APPROVAL, IF ANY: