			17.	
Submit 3 Copies to Appropriate District Office	State of New Me Energy, Minerals and Natural Re		Form C-103	
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088		WELL API NO. 30-015-26869 5. Indicate Type of Lesse STATE FEE	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210				
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No. E-7989	
( DO NOT USE THIS FORM FOR PRO DIFFERENT RESE	ICES AND REPORTS ON WEL OPOSALS TO DRILL OR TO DEEPEN RVOR. USE "APPLICATION FOR PEF -101) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name RED LAKE STATE	
1. Type of Well: OIL OAS WELL WELL	OTHER			
2. Name of Operator MEWBOURNE OIL COM	PANY /		8. Well No. 1	
3. Address of Operator P. O. Box 7698, T	1 (9		9. Pool name or Wildcat RED LAKE MORROW	
16	80 Feet From The West	0.5.7	D Feet From The South Line	
Section 1 b	Township 185 Ra			
	Appropriate Box to Indicate N		-	
NOTICE OF IN	FENTION TO:	SUE		
	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
	CHANGE PLANS	COMMENCE DRILLING	G OPNS. DPLUG AND ABANDONMENT	
PULL OR ALTER CASING CASING TEST AND		CASING TEST AND C		
OTHER:		OTHER:		
12. Describe Proposed or Completed Open work) SEE RULE 1103.	uions (Clearly state all pertinent details, an	d give pertinent dates, inclu	iding estimated date of starting any proposed	
51 23# 1	N-80 casing set at 9	9817'. DV to	DV tool at 6402'. Ran ool set at 6402'. Cemented pps KCL + .5% Halad-22A +	

and the second secon

 $\frac{1}{2}$ 

1st stage with 1050 sacks Class "H" + 2 pps KCL + .5% Halad-22A + .3% CFR-3. Plug down at 12:15 AM 2/9/92. Checked float collar, held okay. Had full returns while cementing. Dropped bomb and opened DV tol at 12:45 AM. Cemented 2nd stage with 1000 sacks Prem Lite, ½ pps Flocele + 5 pps Gilsonite + .4% Halad 22-A + .2% CFR-3. Tailed in with 100 sacks Class "H" neat. Had full returns while cementing. Plug down at 8:15 AM 2/09/92. Closed DV tool. Held okay. Had full returns while cementing. WOC 14 hrs. Pressure tested casing to 1000# after each stage. Held okay.

$\square$		/	
I hereby certify that the info	mution above is the and complete to the best of my know	wledge and belief.	
SKINATURE	In monter	mæ Engr. Oprns. Sec.	DATE2/13/92
TYPE OR FRINT NAME		·	TELEFHONE NO.
(This space for State Use)	ORIGINAL SIGNED BY		
	WHKE WILLIAMS		FEB 2 1 1992
APTROVED BY	SUPERVISOR, DISTRICT I	TITLE	DATE DATE