

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. 30-015-27091

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
E-7811

7. Lease Name or Unit Agreement Name
Cedar Breaks "2" State

8. Well No.
1

9. Pool name or Wildcat
Loco Hills Grayburg

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3629' GR

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.)

1. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER

2. Name of Operator

Mewbourne Oil Company

3. Address of Operator

P.O. Box 5270 Hobbs, New Mexico 88241

4. Well Location

Unit Letter G : 2130 Feet From The North Line and 1980 Feet From The East Line

Section 2

Township 18S

Range 30E

NMPM

Eddy

County

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: ☐

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.

11/05/93 Dump 4 sx. cement on CIBP at 6,840'. Set 5-1/2" CIBP at 4,900'. Dump 4 sx. cement on plug. Set 5-1/2" cement retainer at 3,300'.

11/06/93 Pump 100 sx. Class "C" cement into existing perforations (3,348' - 3,586')

11/08/93 Perforate Grayburg sand from 3,162' - 3,172'. 10' net w/2 SPF for a total of 21 holes. TIH with packer and swab test.

11/09/93 POOH with packer. TIH with open ended tbg. Shut well in.

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

SIGNATURE Erick W. Nelson TITLE Engineer

DATE 11/10/93

TYPE OR PRINT NAME Erick W. Nelson

(505)
TELEPHONE NO. 393-5905

(This space for State Use)

ORIGINAL SIGNED BY

MIKE WILLIAMS

SURVEYOR, DISTRICT II

APPROVED BY

TITLE

DATE

NOV 25 1993

