

Submit 3 Copies
to Appropriate
District Office

Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

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

WELL API NO.
30-015-27732

5. Indicate Type of Lease
STATE FEE

6. State Oil & Gas Lease No.
647

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.)

7. Lease Name or Unit Agreement Name
Illinois Camp "17" State #2

1. Type of Well:
OIL WELL GAS WELL OTHER

2. Name of Operator
Mewbourne Oil Company

8. Well No.
2

3. Address of Operator
P.O. Box 5270, Hobbs, NM 88241

9. Pool name or Wildcat
Illinois Camp Morrow, North

4. Well Location
Unit Letter J : 1980 Feet From The South Line and 1980 Feet From The East Line
Section 17 Township 18S Range 28E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3616 GR

RECEIVED

NOV - 1 1996
OIL CON. DIV.
DIST. 2

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: _____ <input type="checkbox"/>		OTHER: _____ <input type="checkbox"/>	

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.

10/21/96 RU Wireline. Perforated 10272-300, 10195-208 w/2spf. RU Treesaver. Acidized perms w/1650 gal. 7½% NeFe acid. Flushed with 60 bbl. 2% KCL water. SI well.

10/22/96 SITP 800#. Opened well. Put down sales line.

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

SIGNATURE Scott S. Gruns TITLE Engineer DATE 10/31/96

TYPE OR PRINT NAME Scott S. Gruns TELEPHONE NO. _____

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY TIM W. GUM TITLE _____ DATE NOV 5 1996

DISTRICT II SUPERVISOR

CONDITIONS OF APPROVAL IF ANY: