State of New Mexico Submit 3 Copies Form C-103 to Appropriate Enero iinerals and Natural Resources Department Revised 1-1-89 District Office DISTRICT I OIL CONSERVATION DIVISION WELL API NO. P.O. Box 1980, Hobbs, NM 88240 310 Old Santa Fe Trail, Room 206 30-015-27049 Santa Fe. New Mexico 87503 P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease STATE FEE DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 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 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: GAS WELL MET Angell Ranch "26" State OTHER Name of Operator 8. Well No. <u>Mewbourne Oil Company</u> 3. Address of Operator 9. Pool name or Wildcat P.O. Box 5270 Hobbs, New Mexico 88241 Angell Ranch Atoka (Morrow) Well Location 990 Feet From The _ 990 North Unit Letter East Feet From The Line Section 26 Township 19S 27E Eddy **NMPM** County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK **ALTERING CASING** TEMPORARILY ABANDON **CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND ABANDONMEN **PULL OR ALTER CASING** CASING TEST AND CEMENT JOB OTHER: Plug Back 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. Mewbourne Oil Company proposes to plug back to the Wolfcamp Formation as follows: 1. Set A CIBP at 10,600' (existing perforations at 10,660'-10,731') and cap with 35' cement. RECEIVED 2. Perforate the Wolfcamp Formation from 8448'-8630'. 3. Stimulate as necessary. OIL CON. DIV.

DIST. 2 I hereby certify that the information above is grue and cognities to the best of my knowledge and belief. District Manager April 21, 1995 SIGNATURE -TITLE KeHy Ryan TELEPHONE NO. (505) 393-5905 TYPE OR PRINT NAME (This space for State Use) ORIGINAL SIGNED BY TIM W. GOM APR 2 6 1995 MISTRICT II SUPERMISE

APPROVED BY -