Submit 3 Copies to Appropriate District Office

En

State of New Mexico Minerals and Natural Resources Department

DISTRICT

CONDITIONS OF APPROVAL, IF ANY:

OIL CONSERVATION DIVISION

Form C-	103
Revised	1-1-89

P.O. Box 1980, Hobbs, NM 88240	2040 Pacheco St.		WELL API NO. 20 015 20767		
DISTRICT II	Santa Fe, NM 87505		30-015-30767		
P.O. Drawer DD, Artesia, NM 88210			sindicate Type of Lea	STATE FEE	
<u>DISTRICT III</u> 1000 Rio Brazos Rd., Aztec, NM 87410			₀State Oil & Gas Lea		
SUNDRY NO	OTICES 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.)			rLease Name or Unit Agreement Name Palmillo "18" State		
Type of Well: OIL GAS WELL WELL	OTHER				
[⇒] Name of Operator Mewbourne Oil Company			⊪Well No. 1		
3Address of Operator P. O. Box 5270, Hobbs, NM 88	R241		Pool name or Wildon Turkey Track, M	l l	
4Well Location)241		1		
	B Feet From The South	Line and 660	Feet From The	East Line	
Section 18		Range 29E	NMPM	Eddy County	
	10Elevation (Show whether 3359' GR	er DF, RKB, RT, GR, etc.			
11 Check	Appropriate Box to Indicate	e Nature of Notice. Re	port, or Other I	Data	
	INTENTION TO:	SUB	SEQUENT RE	EPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS.	PLUG AND ANBANDONMENT	
PULL OR ALTER CASING]	CASING TEST AND CEM	ENT JOB		
OTHER:		OTHER:			
v/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.					
tool at 8830'. Cemented lower is additives. Cemented upper intersacks Class H neat cement. Plu	1,430'. Ran laterlog and density interval with 575 sacks Class H cerval with 975 sacks Pozmix H cerug down at 10:45 am 12/4/99. Te	ement with 1/4 lb/sack celloffacted casing to 3500 psi.	lake, o los/sack gill	some, and hald loss	
I hereby certify that the information above	ve is true and complete to the best of my l	knowledge and belief.		DATE 12-06-99	
SIGNATURE SIGNATURE	<u> </u>	TITLE District Manager			
TYPE OR PRINT NAME JETTY Elgin				ТЕLЕРНОМЕ NO. 505-393-5905	
(This space for State Use)	Jim W. Sum	District	Syperviso	U DATE /2.14 19	
APPROVED BY	· · ·	TITLE		DATE _/ / /	