

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

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-015-31354
Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
State Oil & Gas Lease No.
Lease Name or Unit Agreement Name Ranch Hand 5 Fee
Well No. 1
Pool name or Wildcat South Carlsbad Morrow

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.)	
Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	
Name of Operator Mewbourne Oil Company	
Address of Operator PO Box 5270, Hobbs, New Mexico 88241	
Well Location Unit Letter L : 1980 Feet From The South Line and 660 Feet From The West Line Section 5 Township 23S Range 27E NMPM Eddy County	
Elevation (Show whether DF, RKB, RT, GR, etc.) 3177 GL	

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

NOTICE OF INTENTION TO:

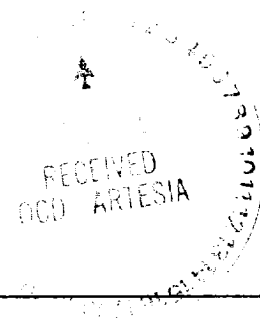
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ANBANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: TD & 5 1/2" csg ☒

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.

01/23/01...TD'ed 8 3/4" hole @ 12070'. Ran 12070' 5 1/2" 17# N, S & P-110 csg. Cemented 1st Stage w/ 920 sks 'H' w/ additives. Mixed @ 13.6 #/g & 1.45 yd. Circl 45 sks to pit. Cement 2nd Stage w/ 1380 sks BJ Lite 'H' w/ additives. Mixed @ 12.7 #/g & 1.85 yd. Tailed w/ 100 sks 'H' neat. Mixed @ 15.6 #/g & 1.18 yd. Estimated TOC @ 1500'.
01/26/01...Released Rig



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

SIGNATURE N.M. Young TITLE District Manager DATE 01-29-01
TYPE OR PRINT NAME N.M. Young TELEPHONE NO. 505-393-5905

(This space for State Use)

ORIGINAL SIGNED BY TIM W. GUM
DISTRICT II SUPERVISOR

FEB 01 2001

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: