

CIST
OP

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. 30-015-31524
Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
State Oil & Gas Lease No. VO-5019
Lease Name or Unit Agreement Name Baldrige 6 State Com
Well No. 1
Pool name or Wildcat Mosley Canyon Strawn

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, NM 88241	
Well Location Unit Letter <u>P</u> : <u>660</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>East</u> Line Section <u>6</u> Township <u>24S</u> Range <u>25E</u> NMPM <u>Eddy</u> County	
Elevation (Show whether DF, RKB, RT, GR, etc.) 3926' 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: PB Morrow & test Strawn. ☒

¹²Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

06/09/01...MI & RU PU. Load tbg w/ 2% KCL. ND Tree & NU BOP. Unset pkr & POOH. GIH w/ CIBP & set @ 10465'.
Dump 35' of cement on CIBP. New PBTD @ 10430'.
06/10/01...Perforate Strawn @ 9464-84'. GIH w/ pkr & tbg. ND BOP & NU Tree.
06/13/01...Acidize Strawn w/ 5000 gals 20% HCl. Swab back & put on production.



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 07-26-01
TYPE OR PRINT NAME N.M. Young TELEPHONE NO. 505-393-5905

(This space for State Use)

APPROVED BY TIM W. GUM ORIGINAL SIGNED BY TIM W. GUM
DISTRICT II SUPERVISOR TITLE DATE AUG 10 2001
CONDITIONS OF APPROVAL, IF ANY: