Submit 3 Copies to Appropriate District Office	15 16 17 18 19 26 Tel	State of New M dinerals and Natural R		ent C\S	Form C-103 Revised 1-1-89	
P.O. Box 1980, Hobbs, MM-88240 2040 Pacheco St.						
				sIndicate Type of Le		
DISTRICT III 1000 Rio Brazos Rd., Aztec: NM 87410				₅State Oil & Gas Lea L-4500	STATE ► FEE State Oil & Gas Lease No. L-4500	
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 OR PROPOSALS (FORM CARD FOR PROPOSALS TO DEEPEN OF PERMIT"				/Lease Name of On	7Lease Name or Unit Agreement Name Stetson Creek 13 State Com	
(FORM C-101) FOR SUCH PROPOSALS.) Type of Well: OIL WELL GAS WELL OTHER				Stelsoff Creek	13 State Com	
² Name of Operator Mewbourne Oil Company				₃Well No. 1	1	
BAddress of Operator PO Box 5270, Hobbs, New Mexico Well Location					Pool name or Wildcat Mosley Canyon Atoka	
Unit LetterC	: 700 Feet From 1	he North	Line and19	00 Feet From The	WestLine	
Section	13 Towns	nip 24S i	Range 24	E NMPM	Eddy County	
		Elevation (Show whether DF,		,,,,,,		
Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data						
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:						
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK					ALTERING CASING	
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OP				IG OPNS.	PLUG AND ANBANDONMENT	
PULL OR ALTER CASING CASING TEST AND CEME				EMENT JOB	ti	
OTHER: OTHER: Add addition				tional Strawn Perforat	ions	
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.						
Well has been completed in Lower Strawn @ 9606-9612'. Isolate Lower Strawn & Test / Evaluate additional Strawn Zones. 3/27/02Perforate Strawn @ 9492-9517'. Acidize w/ 3500 gals 20% HCl. Test. 4/07/02Squeezed perfs 9492-9517' w/ 400 sks 'H' w/ additives. Reversed out 147 sks. Drilled out. 4/11/02Perforated Strawn @ 9336-67' (2 SPF, 6231" EHD). Test. 4/30/02Acidize perfs @ 9336-67' w/ 15000 gals 20% HCl & 15000 gals WF20. Flow/Swab test. 5/30/02Pull isolation tools & put Strawn perfs 9336-67' & 9606-9612' back on production.						
back on production.						
I hereby certify that the information above is true and complete to the best of my knowledge and belief.						
SIGNATURE 7/	Additional and comp	-	ge and belier. _{'LE} District Manage	er	DATE 06-14-02	
TYPE OR PRINT NAME N.M	Young			-		
(This space for State Use)						
ORIGINAL SIGNED BY TIM W. GUM					21 200	
	- POSTRIC	T N SUPERVISOR TO	<u> </u>		DATE	

CONDITIONS OF APPROVAL, IF ANY: