

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

HOBBSDCD
 MAR 04 2018
 RECEIVED

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

<p style="text-align: center;">SUNDRY NOTICES AND REPORTS ON WELLS</p> <p>(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.)</p> <p>1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> SWD <input type="checkbox"/></p> <p>2. Name of Operator Mewbourne Oil Company</p> <p>3. Address of Operator PO Box 5270, Hobbs, NM 88241</p> <p>4. Well Location Unit Letter <u>O</u> : <u>316</u> feet from the <u>South</u> line and <u>2095</u> feet from the <u>East</u> line Section <u>16</u> Township <u>21S</u> Range <u>34E</u> NMPM Lea County</p> <p>11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3730' GL</p>	<p>WELL API NO. 30-025-40342</p> <p>5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/></p> <p>6. State Oil & Gas Lease No.</p> <p>7. Lease Name or Unit Agreement Name Rebel 16/9 B2OJ State Com</p> <p>8. Well Number 1H</p> <p>9. OGRID Number 14744</p> <p>10. Pool name or Wildcat Berry; Bone Spring 96660</p>
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12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<p style="text-align: center;">NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/></p> <p>DOWNHOLE COMMINGLE <input type="checkbox"/></p> <p>CLOSED-LOOP SYSTEM <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>	<p style="text-align: center;">SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/></p> <p>CASING/CEMENT JOB <input checked="" type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>
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13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

01/03/2018 "LOCATION CORRECTION" See attached C-102.

01/11/18 Cut off dry hole marker. Installed cellar & 9 5/8" Well head.

01/15/18 - 01/24/18 MIRU drilling & tested BOPE to 5000# & annular to 3500#. Drill cmt plugs as follows: 45' to 90', 300' to 564', 1770' to 2040', 3765' to 3893', 5580' to 6085', 6600' to 6830', 8598' to 9007', & 10367' to 10400'. Wash & ream from 10400' to 15309'. Drilled new 8 3/4" hole from 15309 to 17970'. TD well @ 17970' on 01/24/18.

01/27/18 RIH w/ 5 1/2" csg to 17945'. Cmt w/1950 sks Lite Class H (50:50:10). Mixed @ 11.9#/g w/2.48 yd. Displaced w/417 bbls of FW. Plug down @ 7:45 A.M. 01/27/18. Circ 113 sks of cmt to the pit.

Spud Date: 01/15/18

Rig Release Date: 01/28/18

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

SIGNATURE Jackie Lathan TITLE Regulatory DATE 03/02/18

Type or print name Jackie Lathan E-mail address: jlathan@mewbourne.com PHONE: 575-393-5905

For State Use Only
 APPROVED BY Saren Sharp TITLE Staff Mgr DATE 3-8-18

Conditions of Approval (if any):

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