

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

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

WELL API NO. 30-015-53358
5. Indicate Type of Lease STATE [] FEE []
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Awesome Blossom 24/23 Fed Com
8. Well Number 523H
9. OGRID Number 14744
10. Pool name or Wildcat Maroon Cliffs; Bone Spring
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3509' GL

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.)
1. Type of Well: Oil Well [x] Gas Well [] Other []
2. Name of Operator Mewbourne Oil Company
3. Address of Operator P.O. Box 5270 Hobbs, NM 88241
4. Well Location Unit Letter 2 : 1370 feet from the North line and 210 feet from the West line
Section 19 Township 20S Range 31E NMPM County Eddy
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3509' GL

12. 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 [x]
PULL OR ALTER CASING [] MULTIPLE COMPL []
DOWNHOLE COMMINGLE []
CLOSED-LOOP SYSTEM []
OTHER: []
SUBSEQUENT REPORT OF:
REMEDIAL WORK [] ALTERING CASING []
COMMENCE DRILLING OPNS. [] P AND A []
CASING/CEMENT JOB []
OTHER: []

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.

MOC requests approval to amend the previously approved APD's to the following:

1) MOC requests a variance for the 2nd Int String per R-111Q guidelines implemented as follows:

- Set an engineered weak point in the 2nd Int String. Weak point will be below salt interval and above the reef. Please refer to the attached documentation for further evaluation.

Spud Date:

5/22/2023

Rig Release Date:

6/16/2023

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

SIGNATURE Gage Owen TITLE Engineer DATE 4/13/2023

Type or print name Gage Owen E-mail address: gowen@mewbourne.com PHONE: 575-552-6224

For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Specialist DATE 05/03/2023

Conditions of Approval (if any):

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State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

1 API Number 30-015-53358		2 Pool Code 56405		3 Pool Name MAROON CLIFFS; BONE SPRING	
4 Property Code		5 Property Name Awesome Blossom 24/23 Fed Com			6 Well Number 523H
7 OGRID NO. 14744		8 Operator Name MEWBOURNE OIL COMPANY			9 Elevation 3509'

10 Surface Location

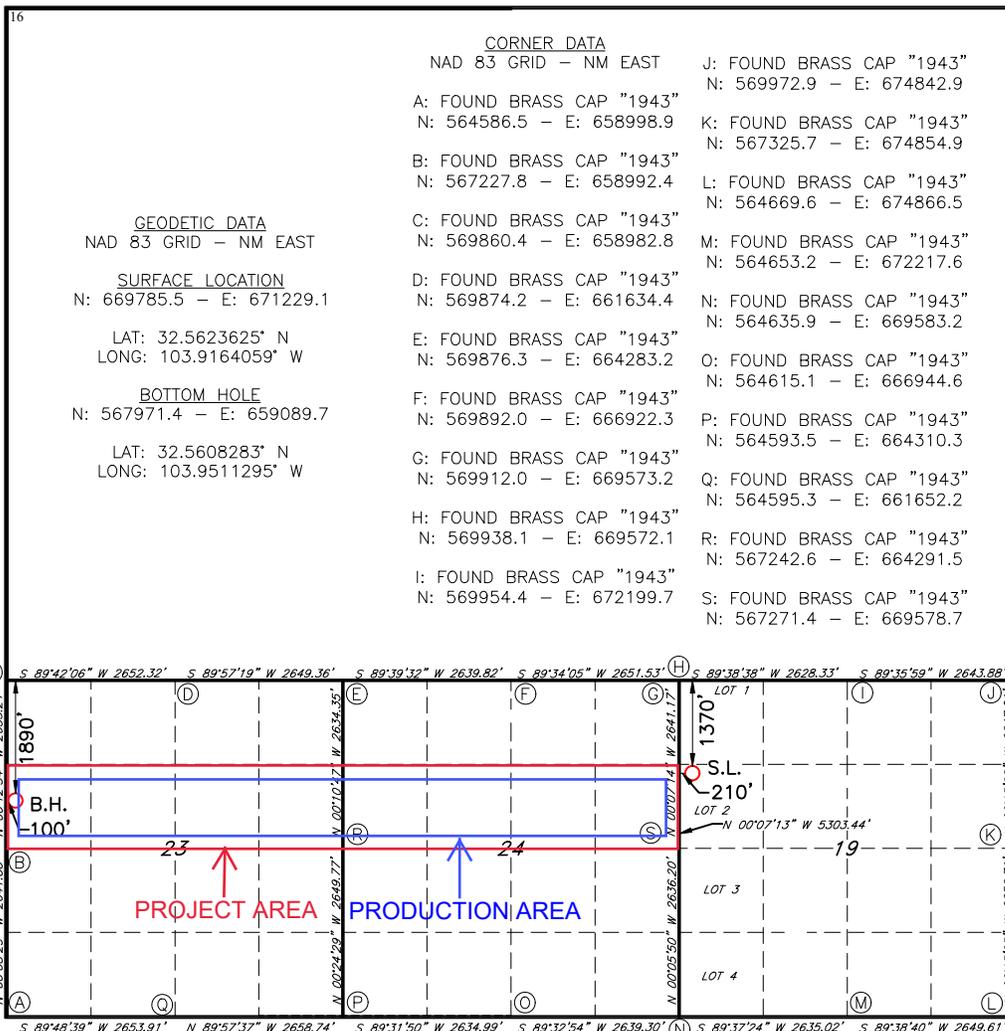
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet From the	East/West line	County
2	19	20S	31E		1370	NORTH	210	WEST	EDDY

11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
E	23	20S	30E		1890	NORTH	100	WEST	EDDY

12 Dedicated Acres 320	13 Joint or Infill	14 Consolidation Code	15 Order No.
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No allowable will be assigned to this completion until all interest have been consolidated or a non-standard unit has been approved by the division.



17 OPERATOR CERTIFICATION
I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

CCW 10/20/22
Signature Date
CHRISTIAN WARD
Printed Name
CWARD@MEWBOURNE.COM
E-mail Address

18 SURVEYOR CERTIFICATION
I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

02/28/2022
Date of Survey
Signature and Seal of Professional Surveyor
19680
Certificate Number
REV: SL MOVE - 09/19/2022
Job No.: LS22030191R2

Mewbourne Oil Company, Awesome Blossom 24/23 B2HE Fed Com #1H
Sec 19, T20S, R31E
SHL: 1370' FNL & 10' FWL (Sec 19)
BHL: 1890' FNL & 100' FWL (Sec 23)

Casing Program

Hole Size	From	To	Csg. Size	Weight	Grade	Conn.	SF	SF Burst	SF Jt	SF Body Tension
				(lbs)			Collapse		Tension	
26.000	0'	610'	20.000	94.0	J55	BTC	1.86	7.56	24.45	25.81
17.500	0'	1932'	13.375	54.5	J55	STC	1.13	2.72	4.17	6.93
17.500	1932'	2225'	13.375	61.0	J55	STC	1.33	2.67	33.25	53.76
12.250	0'	3980'	9.625	40.0	J55	LTC	1.41	2.17	3.27	3.96
8.750	0'	8400'	7.000	26.0	P110	LTC	1.48	2.36	3.17	3.80
6.125	8200'	19774'	4.500	13.5	P110	LTC	2.28	2.65	2.16	2.70
BLM Minimum Safety Factor							1.125	1.0	1.6 Dry	1.6 Dry
									1.8 Wet	1.8 Wet

All casing strings will be tested in accordance with Onshore Oil and Gas Order #2 IILB.1.h. Must have table for contingency casing

		Y or N	
Is casing new? If used, attach certification as required in Onshore Order #1		Y	
Is casing API approved? If no, attach casing specification sheet.		Y	
Is premium or uncommon casing planned? If yes attach casing specification sheet.		N	
Does the above casing design meet or exceed BLM's minimum standards? If not provide justification (loading assumptions, casing design criteria).		Y	
Will the pipe be kept at a minimum 1/3 fluid filled to avoid approaching the collapse pressure rating of the casing?		Y	
Is well located within Capitan Reef?		Y	
If yes, does production casing cement tie back a minimum of 50' above the Reef?		Y	
Is well within the designated 4 string boundary.		Y	
Is well located in SOPA but not in R-111-P?		N	
If yes, are the first 2 strings cemented to surface and 3 rd string cement tied back 500' into previous casing?			
Is well located in R-111-P and SOPA?		Y	
If yes, are the first three strings cemented to surface?		Y	
Is 2 nd string set 100' to 600' below the base of salt?		Y	
Is an open annulus used to satisfy R-111-Q? If yes, see cement design.			
Is an engineered weak point used to satisfy R-111-Q?		Y	
If yes, at what depth is the weak point planned?		2300'	
Is well located in high Cave/Karst?		Y	
If yes, are there two strings cemented to surface?		Y	
(For 2 string wells) If yes, is there a contingency casing if lost circulation occurs?			
Is well located in critical Cave/Karst?		N	
If yes, are there three strings cemented to surface?			
Formation	Est. Top	Formation	Est. Top
Rustler	535'	Delaware (Lamar)	4053'
Salt Top	872'	Bell Canyon	
Salt Base	1883'	Cherry Canyon	
Yates	2200'	Manzanita Marker	
Seven Rivers		Basal Brushy Canyon	
Queen		Bone Spring	7028'
Capitan	2525'	1st Bone Spring Sand	8220'
Grayburg		2nd Bone Spring Sand	8816'
San Andres		3rd Bone Spring Sand	9858'
Glorieta		Abo	
Yeso		Wolfcamp	

Form 3160-5
(June 2019)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2021

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No.

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2

7. If Unit of CA/Agreement, Name and/or No.

1. Type of Well

Oil Well Gas Well Other

8. Well Name and No.

2. Name of Operator

9. API Well No.

3a. Address

3b. Phone No. (include area code)

10. Field and Pool or Exploratory Area

4. Location of Well (Footage, Sec., T.,R.,M., or Survey Description)

11. Country or Parish, State

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplate horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be perfonned or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has detennined that the site is ready for final inspection.)

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

Title

Signature

Date

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C Section 1001 and Title 43 U.S.C Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

GENERAL INSTRUCTIONS

This form is designed for submitting proposals to perform certain well operations and reports of such operations when completed as indicated on Federal and Indian lands pursuant to applicable Federal law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local area or regional procedures and practices, are either shown below, will be issued by or may be obtained from the local Federal office.

SPECIFIC INSTRUCTIONS

Item 4 - Locations on Federal or Indian land should be described in accordance with Federal requirements. Consult the local Federal office for specific instructions.

Item 13: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by the local Federal office. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to the top of any tubing left in the hole; method of closing top of well and date well site conditioned for final inspection looking for approval of the abandonment. If the proposal will involve **hydraulic fracturing operations**, you must comply with 43 CFR 3162.3-3, including providing information about the protection of usable water. Operators should provide the best available information about all formations containing water and their depths. This information could include data and interpretation of resistivity logs run on nearby wells. Information may also be obtained from state or tribal regulatory agencies and from local BLM offices.

NOTICES

The privacy Act of 1974 and the regulation in 43 CFR 2.48(d) provide that you be furnished the following information in connection with information required by this application.

AUTHORITY: 30 U.S.C. 181 et seq., 351 et seq., 25 U.S.C. 396; 43 CFR 3160.

PRINCIPAL PURPOSE: The information is used to: (1) Evaluate, when appropriate, approve applications, and report completion of subsequent well operations, on a Federal or Indian lease; and (2) document for administrative use, information for the management, disposal and use of National Resource lands and resources, such as: (a) evaluating the equipment and procedures to be used during a proposed subsequent well operation and reviewing the completed well operations for compliance with the approved plan; (b) requesting and granting approval to perform those actions covered by 43 CFR 3162.3-2, 3162.3-3, and 3162.3-4; (c) reporting the beginning or resumption of production, as required by 43 CFR 3162.4-1(c) and (d) analyzing future applications to drill or modify operations in light of data obtained and methods used.

ROUTINE USES: Information from the record and/or the record will be transferred to appropriate Federal, State, local or foreign agencies, when relevant to civil, criminal or regulatory investigations or prosecutions in connection with congressional inquiries or to consumer reporting agencies to facilitate collection of debts owed the Government.

EFFECT OF NOT PROVIDING THE INFORMATION: Filing of this notice and report and disclosure of the information is mandatory for those subsequent well operations specified in 43 CFR 3162.3-2, 3162.3-3, 3162.3-4.

The Paperwork Reduction Act of 1995 requires us to inform you that:

The BLM collects this information to evaluate proposed and/or completed subsequent well operations on Federal or Indian oil and gas leases.

Response to this request is mandatory.

The BLM would like you to know that you do not have to respond to this or any other Federal agency-sponsored information collection unless it displays a currently valid OMB control number.

BURDEN HOURS STATEMENT: Public reporting burden for this form is estimated to average 8 hours per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to U.S. Department of the Interior, Bureau of Land Management (1004-0137), Bureau Information Collection Clearance Officer (WO-630), 1849 C St., N.W., Mail Stop 401 LS, Washington, D.C. 20240

Additional Information

Batch Well Data

AWESOME BLOSSOM 24/23 FED COM 521H, US Well Number: 3001553359, Case Number: NMNM130864, Lease Number: NMNM130864,
Operator:MEWBOURNE OIL COMPANY

AWESOME BLOSSOM 24/23 FED COM 523H, US Well Number: null, Case Number: NMNM130864, Lease Number: NMNM130864,
Operator:MEWBOURNE OIL COMPANY

CONFIDENTIAL

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Santa Fe, NM 87505

CONDITIONS

Action 207350

CONDITIONS

Operator: MEWBOURNE OIL CO P.O. Box 5270 Hobbs, NM 88241	OGRID: 14744
	Action Number: 207350
	Action Type: [C-103] NOI Change of Plans (C-103A)

CONDITIONS

Created By	Condition	Condition Date
john.harrison	None	5/3/2023