

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
OIL CONSERVATION DIVISION
 1220 South St. Santa Fe, NM 87505
 RECEIVED
 DEC 15 2017

Form C-103
 Revised July 18, 2013

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.)		WELL API NO. 30-015-44463
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Mewbourne Oil Company		6. State Oil & Gas Lease No.
3. Address of Operator PO Box 5270, Hobbs NM 88240		7. Lease Name or Unit Agreement Name Boston 7 WOMP Fee
4. Well Location Unit Letter <u>M</u> : <u>700</u> feet from the <u>South</u> line and <u>358</u> feet from the <u>West</u> line Section <u>7</u> Township <u>24S</u> Range <u>28E</u> NMPM <u>Eddy</u> County		8. Well Number <u>2H</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3087' GL		9. OGRID Number 14744
		10. Pool name or Wildcat Purple Sage; Wolfcamp (Gas)

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input checked="" type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

12/05/17..TD'ed 8 3/4" hole @ 9414'. Ran 9400' of 7" 26# HCP110 LT&C Csg. Cemented w/250 sks PVL w/additives. Mixed @ 10.2#/g w/4.02 yd. Followed w/100 sks Lite Class H (50:50:10) w/additives. Mixed @ 11.9#/g w/2.47 yd. Tail w/400 sks Class H w/additives. Mixed @ 15.6#/g w/ 1.18 yd. Displaced w/358 bbls OBM. Plug down @ 3:30 AM 12/06/17. Circ 67 sks of cmt to the pit. Tested 7" csg to 6400#, held ok. Set & tested pack-off to 5000#. At 4:00 P.M. 12/07/17, tested csg to 1500# for 30 min, held OK. FIT test to 11.5 PPG EMW. Drilled out with 6 1/8" bit.

Spud Date: 11/21/2017

Rig Release Date:

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

SIGNATURE Ruby Caballero TITLE Regulatory DATE 12/12/17

Type or print name Ruby Caballero E-mail address: rcaballero@mewbourne.com PHONE: 575-393-5905

For State Use Only

APPROVED BY: [Signature] TITLE Staff Mgr DATE 12-15-17
 Conditions of Approval (if any):