

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

**RECEIVED** State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 Revised July 18, 2013

**JUN 29 2018**  
**CONSERVATION DIVISION**  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505  
**DISTRICT II-ARTESIA Q.C.D.**

|   |
|---|
| WELL API NO.<br>30-015-44092  |
| 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No.  |
| 7. Lease Name or Unit Agreement Name<br>Rock Spur 27 W2AP St  |
| 8. Well Number<br>1H  |
| 9. OGRID Number<br>14744  |
| 10. Pool name or Wildcat<br>Purple Sage; Wolfcamp (Gas) 98220                                       |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>2990' 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  Gas Well  Other

2. Name of Operator  
Mewbourne Oil Company

3. Address of Operator  
PO Box 5270, Hobbs NM 88240

4. Well Location  
Unit Letter A : 250 feet from the North line and 870 feet from the East line  
Section 27 Township 24S Range 28E NMPM Eddy County

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

|  |   |   |  |
|--|---|---|--|
| <b>NOTICE OF INTENTION TO:</b>                 |   | <b>SUBSEQUENT REPORT OF:</b>                          |  |
| 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.

05/20/18..Spud 17 1/2" hole @ 455'. Ran 445' of 13 3/8" 54.5# J55 ST&C Csg. Cemented with 180 sks Thixotropic Class C w/additives. Mixed @ 14.4/g w/ 1.54 yd. Followed w/475 sks Class C w/1% CaCl2. Mixed @ 14.8#/g w/1.33 yd. Displaced w/63 bbls of FW. Plug down @ 11:30 AM 05/21/18. Circ 290 sks of cmt to the pits. Test BOPE to 5000# & Annular to 2500#. At 3:30 P.M. 05/21/18, tested csg to 1500#, held OK. FIT test to 10.5 PPG EMW. Drilled out with 12 1/4" bit.

05/23/18..TD'ed 12 1/4" hole @ 2485'. Ran 2475' of 9 5/8" 40# N80 LT&C Csg. Cemented with 400 sks Class C w/additives. Mixed @ 12.0#/g w/ 2.49 yd. Tail w/200 sks Class C w/0.5% CaCl2. Mixed @ 14.8/g w/1.33 yd. Displaced w/184 bbls FW. Plug down @ 8:00 PM 05/23/18. Circ 90 sks of cmt to the pits. Set Cameron mandrel hanger through BOP w/45k#. At 4:30 A.M. 05/24/18, tested csg to 1500#, held OK. FIT test to EMW of 9.8 PPG. Drilled out with 8 3/4" bit.

Spud Date: 05/20/2018

Rig Release Date:

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

SIGNATURE Ruby Cab TITLE Regulatory DATE 06/19/18

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 6-22-18  
 Conditions of Approval (if any):