Submit 1 Copy To Appropriate District	State of New Mex	xico		Form C-103	
Office <u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resour			ed July 18, 2013	
 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283 			WELL API NO. 30-015-45768		
811 S. First St., Artesia, NM 88210	OIL CONSERVATION	DIVISION	5. Indicate Type of Lease		
District III – (505) 334-6178 1220 South St. Francis Dr.		cis Dr.	STATE FE	E 🛛	
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460 Santa Fe, NM 87505		505	6. State Oil & Gas Lease No		
1220 S. St. Francis Dr., Santa Fe, NM)			
87505 SLINDRY NOTI	CES AND REPORTS ON WELLS		7. Lease Name or Unit Agre	ement Name	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO			Chicago 9/8 W0PM Fee		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			8. Well Number		
PROPOSALS.) 1. Type of Well: Oil Well ☐ Gas Well ☒ Other			1H	1	
2. Name of Operator			9. OGRID Number		
Mewbourne Oil Company			14744		
3. Address of Operator			10. Pool name or Wildcat		
PO Box 5270, Hobbs NM 88240			Purple Sage; Wolfcamp (Gas) 98220		
4. Well Location			•		
Unit Letter P : 12	65feet from the _South	_ line and205	feet from the _East	line	
Section 9	Township 24S Range 28E	NMPM	Eddy County		
	11. Elevation (Show whether DR,	RKB, RT, GR, etc	(.)		
	3016' GL				
	PLUG AND ABANDON CHANGE PLANS MULTIPLE COMPL Deleted operations. (Clearly state all pork). SEE RULE 19.15.7.14 NMAC completion. PATD — 5' MD to 19550' MD, 2808 holes, 0.3	REMEDIAL WOF COMMENCE DR CASING/CEMEN OTHER: Con Pertinent details, ar C. For Multiple Co Pertinent details, ar 39" EHD, 120 deg	P AND A AT JOB Inpletion Sundry Indigive pertinent dates, including ompletions: Attach wellbore dia Attach wellbore dia Attach phasing. Frac in 79 stages w/2	S CASING	
We are asking for an exemption from tubing at this time.			RECE	EIVED	
Spud Date: 09/22/2019	Rig Release	Date: 10/14/2019	FEB	0 5 2020	
			EMNRD-O	CD ARTESI	
I hereby certify that the information	above is true and complete to the be	est of my knowleds	ge and belief.		
SIGNATURE DELL	TITLE_Regula	atory	DATE01/28/202	20	
Type or print name Uackie Lathan_	E-mail address: jlathan@mev				
For State Use Only			G C	,	
APPROVED BY: Conditions of Approval (if any):	TITLE		ос_ 	20/20	