

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

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

Form C-103
May 27, 2004

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. 30-015-35033
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Mewbourne Oil Company		6. State Oil & Gas Lease No. E-5229-7
3. Address of Operator PO Box 5270 Hobbs, NM 88240		7. Lease Name or Unit Agreement Name Forty Niner Ridge Unit
4. Well Location Unit Letter <u>G</u> : <u>1980</u> feet from the <u>N</u> line and <u>2310</u> feet from the <u>E</u> line Section <u>16</u> Township <u>23S</u> Range <u>30E</u> NMPM Eddy County		8. Well Number 102
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3140' GL		9. OGRID Number 14744
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		10. Pool name or Wildcat Undes Forty Niner Ridge: Morrow 76800
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____		
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		

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 ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

08/21/06...MI & spud 17 1/2" hole. TD'd hole @ 473'. Ran 473' 13 3/8" 48# H40 ST&C csg. Cemented with 180 sks BJ Thixad Class "H" with additives. Mixed @ 14.6 #/g w/ 1.51 yd. Followed with 300 sks BJ Lite Class "C" with additives. Mixed @ 12.5 #/g w/ 1.97 yd. Tail with 200 sks Class C with 2% CaCl2. Mixed @ 14.8 #/g w/ 1.34 yd. Circ 10 sks to pit. WOC 18 hrs. At 3:30 pm on 08/23/06, tested 13 3/8" casing to 1250# for 30 minutes, held OK. Drilled out with 12 1/4" bit.

08/31/06...TD'ed 12 1/4" hole @ 3537'. Ran 3537' 9 3/8" 40# J55/N80 LT&C Csg. Cemented with 1100 sks BJ Lite Class "C" (35:65:6) with additives. Mixed @ 12.5 #/g w/ 2.04 yd. Tail with 400 sks Class C with 1% CaCl2. Mixed @ 14.8 #/g w/ 1.33 yd. Circ 115 sks to pit. WOC 18 hrs. Test BOPE to 5000# & annular to 2500#. At 4:00 am 09/01/06, tested 9 3/8" casing to 1500# for 30 mins, held OK. Formation test 12# PPG EMW. Charts and schematic attached. Drilled out with 8 3/4" bit.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Kristi Green TITLE Hobbs Regulatory DATE 09/06/06

Type or print name Kristi Green E-mail address: kgreen@mewbourne.com

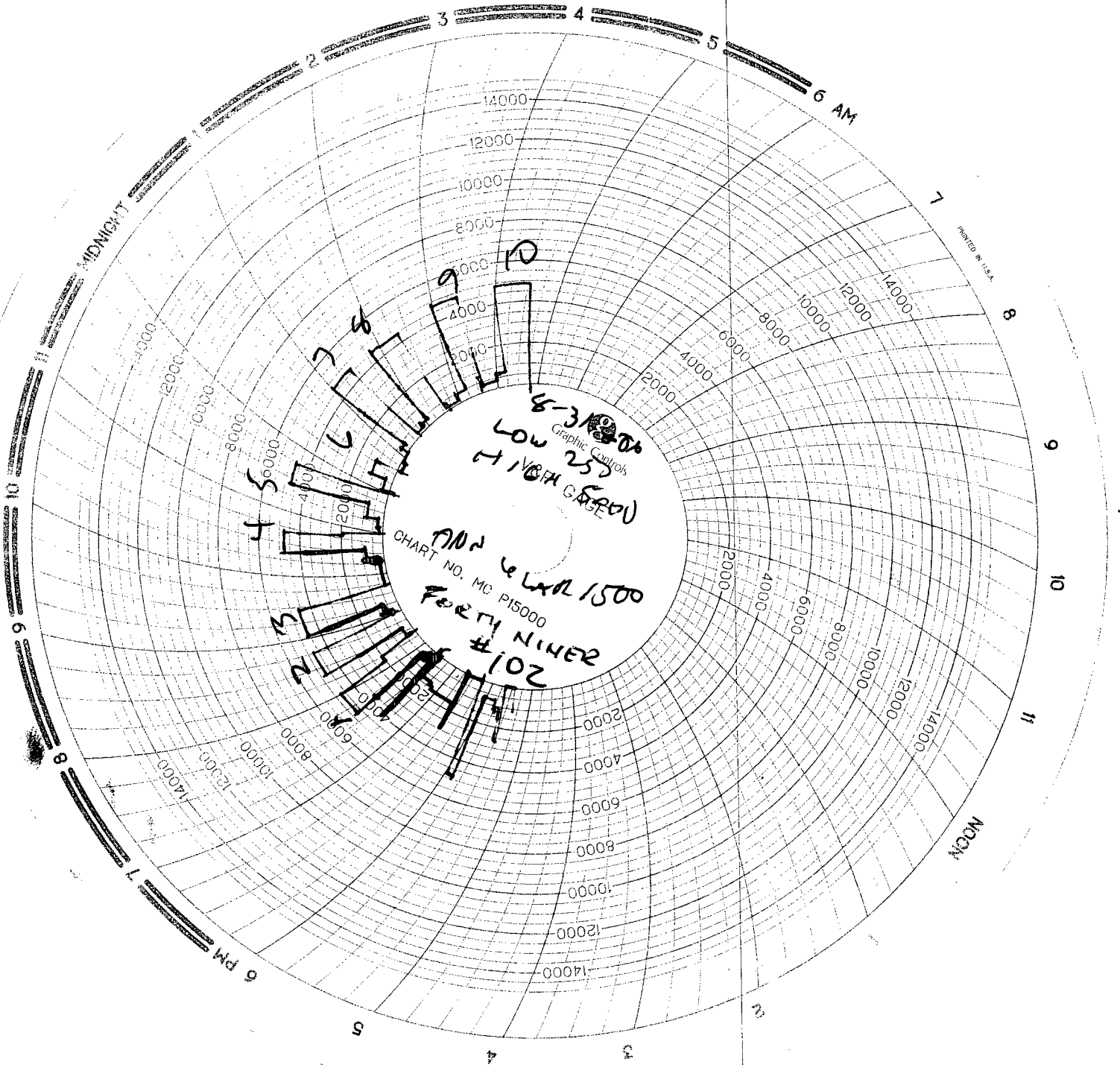
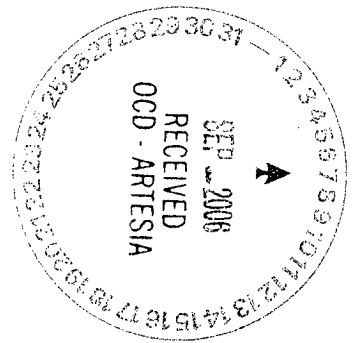
Telephone No. 505-393-5905

For State Use Only

APPROVED BY: Accepted for record - NMOCD TITLE _____

DATE 9/8/06

Conditions of Approval (if any):



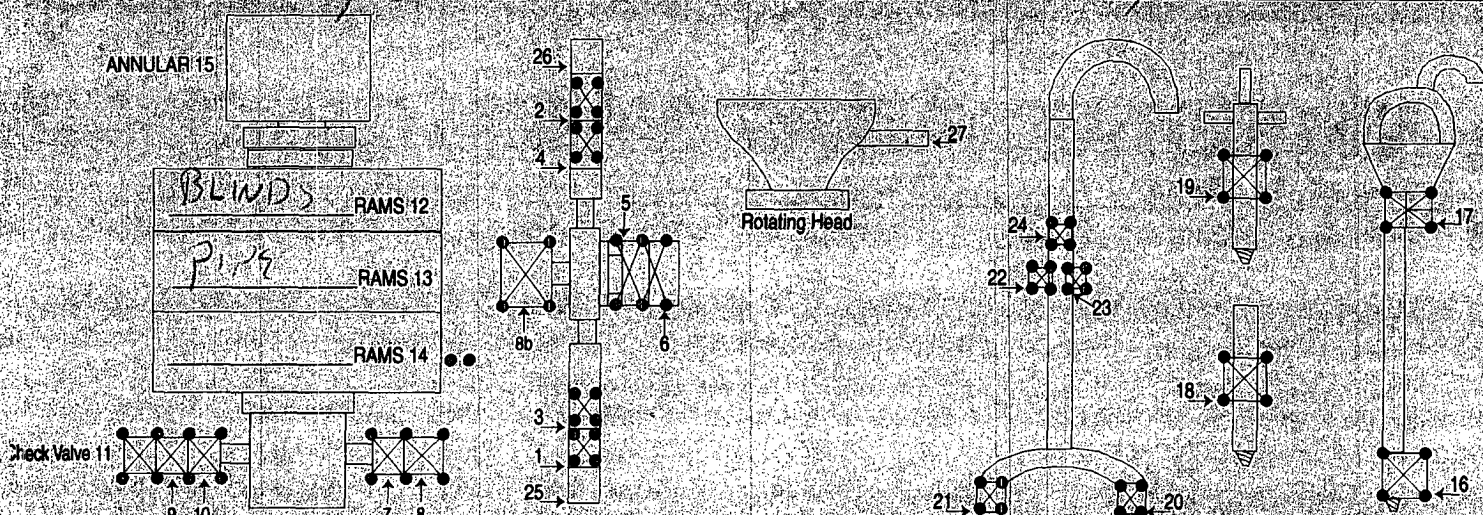
MAN WELDING SERVICES, INC.

P.O. Box 1541 • Lovington, N.M. 88260
BUS: 505 396-4540 • FAX: 505 396-0044



INVOICE
No B 5763

Company WABENT Date 8-31-06 Start Time 3:00 ☐ am ☒ pm
Lease FOURTYNINE R. D. 6 UNIT # 102 County EDDY State NM
Company Man LYNN SIMMONS
Wellhead Vendor _____ Tester JO MILLER
Drig. Contractor PATTERSON - UTI Rig # 493
Tool Pusher K.C. CHISHAM
Plug Size 1 1/2" Drill Pipe Size 4 1/2 x 11"
Casing Valve Opened YES Check Valve Open YES



TEST #	ITEMS TESTED	TEST LENGTH	LOW PSI	HIGH PSI	REMARKS
1	11, 12, 25, 26, 6	5/10	250	5000	
2	12, 5, 9, 12	5/10	250	5000	
3	3, 4, 5, 10, 12	5/10	250	500	
4	9, 10, 13	5/10	250	5000	
5	7, 10, 13	5/10	250	5000	
6	7, 10, 15	5/10	250	1500	
7	14	5/10	250	5000	
8	15	5/10	250	5000	
9	16	5/10	250	5000	
10	17	5/10	250	5000	

HR @ 10.00

HR @

Mileage 100 @ 100

SUB TOTAL 1140

TAX 61.28

TOTAL 1201.28