Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103
<u>District I</u>	Energy, Minerals and Natu	iral Resources	May 27, 2004
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.
<u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-015-35873
<u>District III</u> 1000 Rio Brazos Rd , Aztec, NM 87410	1220 South St. Francis Dr.		5. Indicate Type of Lease STATE FEE
<u>District IV</u>	ict IV Santa Fe, NM 8/505		6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		E742	
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name
(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			Empire 20 State
PROPOSALS)		8. Well Number	
1. Type of Well: Oil Well X Gas Well Other		4	
2. Name of Operator			9. OGRID Number
Mewbourne Oil Company	APR - 3 2008		14744
3. Address of Operator			10. Pool name or Wildcat
PO Box 5270 Hobbs, NM 88240	OCD-AF	RIESIA	Empire, Glorieta-Yeso, E 96610
4. Well Location Unit Letter F: 1650_feet from the N line and2310feet from theWline			
Section 20 Township 17S Range 29E NMPM Eddy County 11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
3619' GL			
Pit or Below-grade Tank Application or Closure			
Pit type Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water			
Pit Liner Thickness: mil Below-Grade Tank: Volumebbls; Construction Material			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUB		SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON 🔲	REMEDIAL WORK	☐ ALTERING CASING ☐
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRIL	LING OPNS.□ P AND A □
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	
OTHER:	(0)		ection on C105 & C104
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.			
MOC has issued a new C105 & C104 with the correct connection date. Also the Pool name has been corrected for the previous sundry sent in dated 03/06/08.			
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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 \square , a general permit \square or an (attached) alternative OCD-approved plan \square .			
SIGNATURE ACKE	Lathan TITLE H	obbs Regulatory	DATE04/02/08
The state of the s	y gunum III LE_III	ooos Regulatory	DAIL 04/02/00
Type or print name Jackie Lathan For State Use Only	E-m	nail address:	Telephone No. 505-393-5905
APPROVED BY:	TITLE		DATE
Conditions of Approval (if any):			