

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

Form C-103
 May 27, 2004

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

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|---|
| WELL API NO. 30-015-37117 |
| 5. Indicate Type of Lease STATE FEE <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No. |

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| 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.) | | 7. Lease Name or Unit Agreement Name Long Draw 4 N |
| 1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well Other | RECEIVED OCT 14 2009 NMOCD ARTESIA | 8. Well Number 1 |
| 2. Name of Operator Mewbourne Oil Company | | 9. OGRID Number 14744 |
| 3. Address of Operator PO Box 5270 Hobbs, NM 88240 | | 10. Pool name or Wildcat Cemetery Yeso |
| 4. Well Location Unit Letter <u> </u> N : <u> 330 </u> feet from the <u> S </u> line and <u> 2310 </u> feet from the <u> W </u> line Section <u> 4 </u> Township <u> 20S </u> Range <u> 25E </u> NMPM Eddy County | | |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3488' GL | | |
| Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> | | |
| 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

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

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.

09/25/09 Ran GR/CCL. Perforate Yeso @ 2811' - 2922', 8SP5F, 20', 32 holes, 0.40" EHD, 120° phasing, 19 GC. Frac with 1000 gals 10% HCl, 307500 gals slickwater & 152000# 20/40 Texas Gold sand. Perforate Yeso @ 2455' - 2532', 9SP5F, 25', 45 holes, 0.40" EHD 120° phasing, 19 GC. Frac with 1000 gals 10% HCl, 150000 gals 20# slickwater & 75000# 20/40 Texas Gold sand. Flowback for cleanup.

10/02/09 Put well on production.

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 Jackie Lathan TITLE Hobbs Regulatory DATE 10/13/09
 Type or print name Jackie Lathan E-mail address: jlathan@mewbourne.com Telephone No. 575-393-5905
For State Use Only

APPROVED BY: Jaqueline TITLE Geologist DATE 10/23/2009
 Conditions of Approval (if any): _____