Office	State of New Mexico		Form C-103
District I	Energy, Minerals and Natural Resources		June 19, 2008
1625 N French Dr., Hobbs, NM 88240			WELL API NO. 30-015-37703
District II	OIL CONSERVATION DIVISION		
1301 W Grand Ave , Artesia, NM 88210 District III	1220 South St. Francis Dr.		5. Indicate Type of Lease
1000 Rto Brazos Rd Aztec NM 87410		STATE \square FEE X	
District IV Santa Fe, NM 8/505		6. State Oil & Gas Lease No.	
1220 S St Francis Dr., Santa Fe, NM	1220 S St Francis Dr., Santa Fe, NM 87505		
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			West Draw 5K
DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			West Diaw Six
PROPOSALS.)			8. Well Number 1
1. Type of Well: Oil Well X Gas Well Other			
2. Name of Operator			9. OGRID Number
Mewbourne Oil Company		14744	
3. Address of Operator PO Box 5270		10. Pool name or Wildcat	
Hobbs, NM 88241		Undesignated Yeso	
4. Well Location			
Unit Letter K: 1650 feet from the South line and 2310 feet from the West line			
Section 5 Township 20S Range 25E NMPM Eddy County			
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
	3501' GL	MID, MI, OM, etc.)	
	3301 GE		
10 (1 1 4		CAL	0.1 D
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF IN	TENTION TO:	l elibe	SEQUENT REPORT OF:
——————————————————————————————————————		_	
TEMPORARILY ABANDON			
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	JOB []
DOWNHOLE COMMINGLE			
OTHER. Add Va Dd.	N	OTUED.	
OTHER: Add Yeso Perfs			aire a stimul data in haling agains at all data
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.			
or recompletion.			
09/22/10 Mewbourne Oil Company plans to Isolate Yeso Perfs @ 2841' – 2969'. Perforate and test Yeso @ 2426' – 2629'.			
A 3000# BOP will be utilized during operations.			
A 3000# BOT WIT DE UTILIZED DUTING	operations.		_
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			SEP 2 2 2010
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			NMOCD ARTESIA
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I hereby certify that the information a	above is true and complete to the be	est of my knowledge	and belief.
SIGNATURE ARKI,) H . TITLE Hobbs	Dogulatory	DATE 09/22/10
SIGNATURE			
Type or print name Jackie Lathan E-mail address: jlathan@mewbourne.com PHONE: 575-393-5905			
For State Use Only			
APPROVED BY DOUBLE	TITLE LID!	d supervisor	DATE 9-22/0
Conditions of Approval (if any):	THE TIEL	a cobstance	Ditte Oin
conditions of ripproval (if ally).	~		