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

WELL API NO.
30-015-26867

5. Indicate Type of Lease
STATE ☐ FEE ☐

6. State Oil & Gas Lease No.
NM-83584

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
Federal V

1. Type of Well: Oil Well ☐ Gas Well ☒ Other

8. Well Number
3

2. Name of Operator
Mewbourne Oil Company

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9. OGRID Number
14744

3. Address of Operator
PO Box 5270 Hobbs, NM 88240

10. Pool name or Wildcat
Delaware

4. Well Location
Unit Letter E : 1980 feet from the North line and 660 feet from the West line
Section 8 Township 20S Range 28E NMPM Eddy County

11. Elevation *(Show whether DR, RKB, RT, GR, etc.)*
3295' 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: Volume** _____ **bbls; Construction Material** _____

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	☐	PLUG AND ABANDON	☐	REMEDIAL WORK	☐	ALTERING CASING	☐
TEMPORARILY ABANDON	☐	CHANGE PLANS	☐	COMMENCE DRILLING OPNS.	☐	P AND A	☐
PULL OR ALTER CASING	☐	MULTIPLE COMPL	☐	CASING/CEMENT JOB	☐		
OTHER:	☐			OTHER: Mechanical Integrity Test	☒		

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.

Conducted Mechanical Integrity test on 10/22/04. Tested casing to 500# for 30 minutes, held OK. Chart is enclosed.

Injection under Order # SWD-524 withdrawn

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 10/25/04

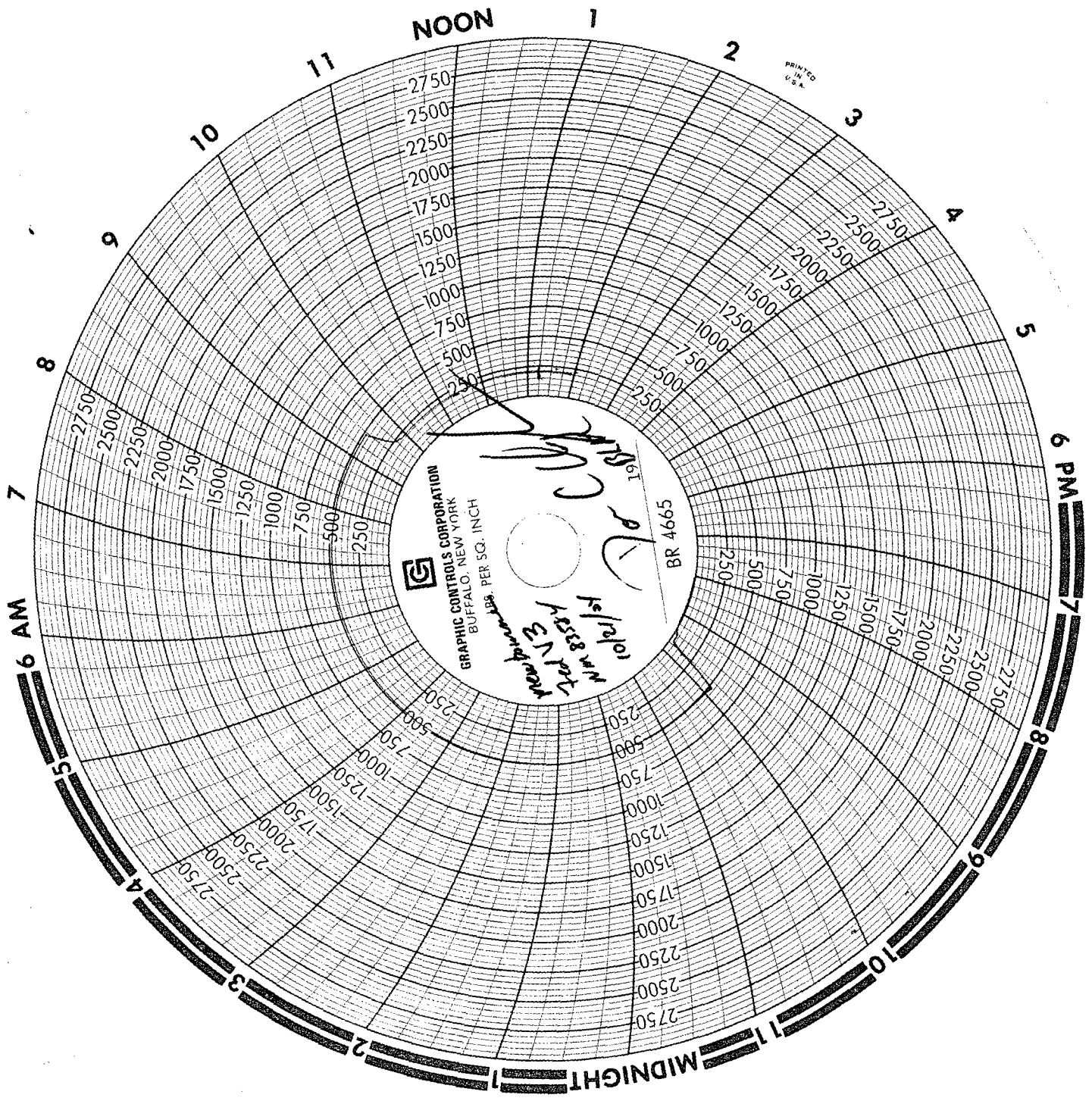
Type or print name Kristi Green E-mail address: Telephone No. 505-393-5905

For State Use Only

APPROVED BY: _____ TITLE _____ DATE 10/28/04

Conditions of Approval (if any):

Accepted for record - NMOCD



Accepted for record - NMOCD

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