

Submit 1 Copy To Appropriate District Office  
 District I – (575) 393-6161  
 1625 N. French Dr., Hobbs, NM 88240  
 District II – (575) 748-1283  
 811 S. First St., Artesia, NM 88210  
 District III – (505) 334-6178  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV – (505) 476-3460  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Rec'd 11/03/2020 - NMOCD

Form C-103  
 Revised July 18, 2013

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

WELL API NO. 30-015-46353
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Starship 28/21 WOOB Fee
8. Well Number 1H
9. OGRID Number 14744
10. Pool name or Wildcat Purple Sage; Wolfcamp (gas)
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3063' GL

**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.)

1. Type of Well: Oil Well  Gas Well  Other

2. Name of Operator  
Mewbourne Oil Company

3. Address of Operator  
PO Box 5270, Hobbs NM 88241

4. Well Location  
 Unit Letter P : 215 feet from the South line and 1200 feet from the East line  
 Section 28 Township 23S Range 28E NMPM Eddy County

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: completion sundry <input checked="" type="checkbox"/>	

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

10/02/20 Frac Horizontal Wolfcamp from 9671' MD to 19573' MD w/25,670,106 gals SW, carrying 24,329,342# Local 100 Mesh Sand. Flowback well for cleanup.

10/14/20 Drill out frac plugs to 19586'

10/19/20 Put well on production.

Formation Top Bottom Descriptions, Contents, etc.  
 Name Top (MD) Wolfcamp 9436' – 19636' WATER, OIL & GAS

Top of Salt 924' Castile 1217' Base of salt 2408' Delaware 2612' Bell Canyon 2652' Cherry Canyon 3480'  
 Manzanita 3609' Brushy Canyon 4728' Bone Spring 6250' Wolfcamp 9436'

Spud Date: 11/09/2019

Rig Release Date: 11/30/19

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Jackie Lathan TITLE Regulatory DATE 11/03/2020

Type or print name Jackie Lathan E-mail address: jlathan@mewbourne.com PHONE: 575-393-5905

**For State Use Only**

APPROVED BY: [Signature] TITLE Staff Manager DATE 11/12/2020

Conditions of Approval (if any):