

Submit 1 Copy To Appropriate District Office  
 District I - (575) 393-6161  
 District II - (575) 748-1283  
 District III - (505) 334-6178  
 District IV - (505) 476-3460  
 1625 N. French Dr., Hobbs, NM 88240  
 811 S. First St., Artesia, NM 88210  
 1000 Rio Brazos Rd., Aztec, NM 87411  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

**NM OIL CONSERVATION**  
 ARTESTA DISTRICT

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 Revised July 18, 2013

JUN 4 2015

RECEIVED

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

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		WELL API NO. 30-015-38419 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> 6. State Oil & Gas Lease No. VO-7679 / NM-19619
2. Name of Operator Mewbourne Oil Company		7. Lease Name or Unit Agreement Name Coltrane 36 B2PA State 8. Well Number 1H
3. Address of Operator PO Box 5270, Hobbs, NM 88241		9. OGRID Number 14744 10. Pool name or Wildcat Wildcat; Bone Spring
4. Well Location Unit Letter <u>P</u> : <u>430</u> feet from the <u>South</u> line and <u>660</u> feet from the <u>East</u> line Section <u>36</u> Township <u>25S</u> Range <u>31E</u> NMPM Eddy County		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3299' GR		

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

<b>NOTICE OF INTENTION TO:</b> 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"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> 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 <input checked="" type="checkbox"/> OTHER: <input type="checkbox"/>
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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.

05/22/2015 Continue drlg w/17 1/2" bit to 1088'. RIH w/13 3/8" 54.5# H40 ST&C csg to 1088'. Cmt w/700 sks Class C w/additives. Mixed @ 13.5#/g w/1.75 yd. Tail w/200 sks Class C w/1% CaCl2. Mixed @ 14.8#/g w/1.34 yd. Plug down @ 10:30 A.M. 05/23/15. Circ 182 sks of cmt to the pit. At 5:30 P.M. 05/24/15 tested csg & BOPE to 1250# for 30 mins, held OK. Continue drlg w/12 1/4" bit.

05/27/2015 Continue drlg w/12 1/4" bit to 4315'. RIH w/9 5/8" 40# N80 & J55 LT&C & 36# J55 LT&C csg to 4315'. Cmt w/1150 sks Lite Class C w/additives. Mixed @ 14.8#/g w/1.33 yd. Plug down @ 7:15 P.M. 05/27/15. Circ 185 sks of cmt to the pit. At 1:45 A.M. 05/29/15 tested csg to 1500# for 30 mins, held OK. Continue drlg w/8 3/4" bit.

Spud Date: 01/31/11

Rig Release Date:

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 06/01/15

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

APPROVED BY: Al Dade TITLE Dist H Supervisor DATE 6/11/15  
 Conditions of Approval (if any):