

Submit To Appropriate District Office Two Copies <b>District I</b> 1625 N. French Dr., Hobbs, NM 88240 <b>District II</b> 811 S. First St., Artesia, NM 88210 <b>District III</b> 1000 Rio Brazos Rd., Aztec, NM 87410 <b>District IV</b> 1220 S. St. Francis Dr., Santa Fe, NM 87505		<b>State of New Mexico</b> <b>Energy, Minerals and Natural Resources</b>  <b>Oil Conservation Division</b> <b>1220 South St. Francis Dr.</b> <b>Santa Fe, NM 87505</b>			<b>Form C-105</b> Revised April 3, 2017		
		1. WELL API NO. 30-015-44803					
		2. Type of Lease <input type="checkbox"/> STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN					
		3. State Oil & Gas Lease No.					
<b>WELL COMPLETION OR RECOMPLETION REPORT AND LOG</b>							
4. Reason for filing:  <input checked="" type="checkbox"/> <b>COMPLETION REPORT</b> (Fill in boxes #1 through #31 for State and Fee wells only)  <input type="checkbox"/> <b>C-144 CLOSURE ATTACHMENT</b> (Fill in boxes #1 through #9, #15 Date Rig Released and #32 and/or #33; attach this and the plat to the C-144 closure report in accordance with 19.15.17.13.K NMAC)				5. Lease Name or Unit Agreement Name Skynyrd 2 W0DM Fee			
				6. Well Number: 2H <div style="text-align: right; font-weight: bold; font-size: 1.2em;">RECEIVED</div>			
7. Type of Completion: <input checked="" type="checkbox"/> NEW WELL <input type="checkbox"/> WORKOVER <input type="checkbox"/> DEEPENING <input type="checkbox"/> PLUGBACK <input type="checkbox"/> DIFFERENT RESERVOIR <input type="checkbox"/> OTHER				FEB 04 2019			
8. Name of Operator Mewbourne Oil Company				9. OGRID 14744			
10. Address of Operator PO Box 5270 Hobbs, NM 88240				11. Pool name or Wildcat Purple Sage Wolfcamp (Gas) 98220			
12. Location	Unit Ltr	Section	Township	Range	Lot	Feet from the	
Surface:	D	2	24S	28E		175	
BH:	M	2	24S	28E		337	
13. Date Spudded 08/3/2018	14. Date T.D. Reached 08/18/2018	15. Date Rig Released 08/20/2018		16. Date Completed (Ready to Produce) 01/05/2019		17. Elevations (DF and RKB, RT, GR, etc.) 3016 GL	
18. Total Measured Depth of Well 14305 MD <i>19646</i>		19. Plug Back Measured Depth 14275 MD		20. Was Directional Survey Made? Yes		21. Type Electric and Other Logs Run GR	
22. Producing Interval(s), of this completion - Top, Bottom, Name 9795' - 14265' Wolfcamp							
<b>CASING RECORD (Report all strings set in well)</b>							
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED		
13 3/8"	54.5 <i>155</i>	168'	17 1/2"	<i>E</i> 201	0		
9 5/8"	40 <i>180</i>	2522'	12 1/4"	<i>E</i> 575	0		
7"	29 <i>HOD 110</i>	9865'	8 3/4"	<i>C</i> 775	0		
<b>24. LINER RECORD</b>							
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	25. TUBING RECORD		
4 1/2"	9133'	14265'	300 <i>C</i>		<b>Provide tubing detail or request Tubing Exception</b> <i>Approved 4-8-2019</i>		
<i>6.125'</i>	<i>HOD 110</i>	<i>13.5</i>					
26. Perforation record (interval, size, and number) 9795' - 14265' (28 stages, 0.39" EHD, 972 holes)				27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. DEPTH INTERVAL    AMOUNT AND KIND MATERIAL USED 9795' - 14265'    11,478,516 gals SW, carrying 7,035,900# White 100 Mesh sand & 4,179,920# local 40/70 sand.			
<b>28. PRODUCTION</b>							
Date First Production 01/05/2019		Production Method (Flowing, gas lift, pumping - Size and type pump) Flowing			Well Status (Prod. or Shut-in) Producing		
Date of Test 1/8/19	Hours Tested 24	Choke Size 28/64	Prod'n For Test Period	Oil - Bbl 751	Gas - MCF 1709	Water - Bbl. 2855	
						Gas - Oil Ratio 2276	
Flow Tubing Press. NA	Casing Pressure 2250	Calculated 24-Hour Rate	Oil - Bbl. 751	Gas - MCF 1709	Water - Bbl. 2855	Oil Gravity - API - (Corr.) 49	
29. Disposition of Gas (Sold, used for fuel, vented, etc.) Sold						30. Test Witnessed By Robin Terrell	
31. List Attachments C104, Deviation Survey, completion sundry, Directional Survey, Gyro log, Final C-102							
32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit.						33. Rig Release Date:	
34. If an on-site burial was used at the well, report the exact location of the on-site burial:							
Latitude		Longitude			NAD83		
I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief							
Ruby Caballero			Printed				
Signature <i>R Caballero</i>		Name Regulatory		Title		Date	
E-mail Address rcaballero@mewbourne.com							

