

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 5/11/2020 - NMOCD

Form C-103  
Revised July 18, 2013

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

WELL API NO. 30-025-45402
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Dolly Varden 25/24 B2GB St Com
8. Well Number 1H
9. OGRID Number 14744
10. Pool name or Wildcat Grama Ridge; Bone Spring 28435
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3640' 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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>
2. Name of Operator Mewbourne Oil Company
3. Address of Operator PO Box 5270, Hobbs NM 88241
4. Well Location Unit Letter G : 2435 feet from the North line and 2405 feet from the East line Section 25 Township 21S Range 34E NMPM Lea County
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3640' GL

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

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

05/02/2020

TD'd 6 1/8" hole @ 17859' MD. Ran 17859' of 4 1/2" 13.5# HCP110 CDC HTQ csg. Cement w/725 sks Poz H (35:65) w/additives. Mixed @ 13.5#/g w/1.60 yd. Followed w/5 bbls FW. Released dart. Displaced w/226 bbls sugar FW. Plug down @ 7:00 A.M. 05/04/20. Bump plug w/2600#. Set packer w/70k#. Sting out of PBR w/2500# on DP. Displaced 7" csg w/240 bbls of FW. Circ 193 sks of cmt off of liner top to the pit. Circ 375 bbls FW w/polymer. At 9:45 A.M., 05/04/20, tested csg 1500# for 30 mins, held OK. Top of liner @ 9643'.

Rig released on 05/06/2020 @ 1:45 A.M.

Spud Date: 04/06/2020

Rig Release Date: 05/06/2020

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 05/11/20

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

For State Use Only

APPROVED BY: PM TITLE LM DATE 5/27/2020  
Conditions of Approval (if any):