Submit 1 Copy To Appropriate District Office	Energy, Minerals and Natural Resources OIL CONSERVATION DIVISION 1220 South St. Francis Dr.		Form C-103
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283			Revised July 18, 2013 WELL API NO. 30-025-42436
811 S. First St., Artesia, NM 88210			5. Indicate Type of Lease
District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410			STATE FEE
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, N	M 8/505	6. State Oil & Gas Lease No. VB-1832
87505	ICES AND DEDODTS ON W	TIIC	7. Lease Name or Unit Agreement Name
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			Toro 36 B3DM State
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SECTION PROPOSALS.)			8. Well Number
1. Type of Well: Oil Well	Gas Well Other		1H
2. Name of Operator		MAY I 3 2015	9. OGRID Number
Mewbourne Oil Company			14744
3. Address of Operator PO Box 5270, Hobbs NM 88241		RECEIVED	10. Pool name or Wildcat Antelope Ridge; Bone Spring
4. Well Location			
Unit Letter _D :200feet from theNorth line and660feet from theWest line			
Section 36 Township 23S Range 34E NMPM Lea County			
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3402' GL			
3402 GE			
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	•	
TEMPORARILY ABANDON	CHANGE PLANS		RILLING OPNS. P AND A
PULL OR ALTER CASING	MULTIPLE COMPL] CASING/CEME	NT JOB
DOWNHOLE COMMINGLE			
CLOSED-LOOP SYSTEM	Γ-	OTHER:	П
OTHER: 13 Describe proposed or comp	oleted operations (Clearly sta		nd 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.			
05/02/2015 Ream w/30" bit to 15'. Continue drlg to 120'. Set 120' of 20" conductor pipe & cmt to surface.			
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Spud Date: 03/31/15	Rig F	Release Date:	
Spud Date: 05/51/15	Kig i	celeuse Bute.	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE TO SIGNATURE	Lathan TITLE	Regulatory	DATE 05/11/15
Type or print nameJackie Lathan E-mail address: jlathan@mewbourne.com PHONE: 575-393-5905			
For State Use Only			
APPROVED BY:	d for Record Only		DATE
APPROVED BY: DATE Conditions of Approval (if any):			