

District I
1625 N. French Dr., Hobbs, NM 88240

District II
811 S. First St., Artesia, NM 88210

District III
1000 Rio Brazos Rd., Aztec, NM 87410

District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources

Form C-104
Revised August 1, 2011

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Submit one copy to appropriate District Office

AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address Mewbourne Oil Company PO Box 5270 Hobbs, NM 88241		² OGRID Number 14744
⁴ API Number 30 - 025 - 45247		³ Reason for Filing Code/ Effective Date NW / 04/26/2019
⁵ Pool Name WC-025 G-08 S263205N; Upper Wolfcamp	⁶ Pool Code 98203	
⁷ Property Code 315628	⁸ Property Name Red Hills West 21 WIAP Fed Com	⁹ Well Number 2H

HOBBS OGD
MAY 10 2019
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II. ¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
A	21	26S	32E		185	North	620	East	Lea

¹¹ Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
P	21	26S	32E		108	South	354	East	Lea

¹² Lse Code	¹³ Producing Method Code	¹⁴ Gas Connection Date	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date
F	Flowing	04/26/19			

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ O/G/W
35246	Shell Trading US Co. PO Box 4604 Houston, TX 77210	O
285689	Delaware Basin Midstream, LLC PO Box 1330 Houston, TX 77251-1330	G
	Provide tubing detail when available	

IV. Well Completion Data

²¹ Spud Date	²² Ready Date	²³ TD	²⁴ PBTB	²⁵ Perforations	²⁶ DHC, MC
12/06/18	04/26/19	17035' MD	17020'	12263' - 16995'	NA
²⁷ Hole Size	²⁸ Casing & Tubing Size	²⁹ Depth Set	³⁰ Sacks Cement		
17 1/2"	13 3/4"	715'	600		
12 1/4"	9 5/8"	4365'	1300		
8 3/4"	7"	12274'	800		
6 1/2"	4 1/2"	11439' - 16995'	300		

V. Well Test Data

³¹ Date New Oil	³² Gas Delivery Date	³³ Test Date	³⁴ Test Length	³⁵ Tbg. Pressure	³⁶ Csg. Pressure
04/26/19	04/26/19	4/28/19	24 hrs		3225
³⁷ Choke Size	³⁸ Oil	³⁹ Water	⁴⁰ Gas	⁴¹ Test Method	
20/64	525	1703	1373	Production	

⁴² I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Ruby Caballero*

Printed name:
Ruby Caballero

Title:
Regulatory

E-mail Address:
rcaballero@mewbourne.com

Date: 05/08/19
Phone: 575-393-5905

OIL CONSERVATION DIVISION

Approved by: *Karen Sharp*

Title: *Staff Mgr*

Approval Date: 5-15-19

Documents pending BLM approvals will subsequently be reviewed and scanned

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.

5. Lease Serial No.
NMMN27507

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2

7. If Unit or CA/Agreement, Name and/or No.

1. Type of Well
 Oil Well Gas Well Other

8. Well Name and No.
RED HILLS WEST 21 W1AP FED COM 2H

2. Name of Operator
MEWBOURNE OIL COMPANY
Contact: JACKIE LATHAN
E-Mail: jlathan@mewbourne.com

9. API Well No.
30-025-45247

3a. Address
PO BOX 5270
HOBBS, NM 88241

3b. Phone No. (include area code)
Ph: 575-393-5905

10. Field and Pool or Exploratory Area
UPPER WOLFCAMP

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 21 T26S R32E Mer NMP NENE 185FNL 620FEL

11. County or Parish, State
LEA COUNTY, NM

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Hydraulic Fracture
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all proximal markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

3/27/19
Frac Horizontal Wolfcamp from 12,263' MD (12,118 TVD) to 16,995' MD (12,137' TVD). 1,404 holes, 0.39" EHD, 120 deg phasing. Frac in 40 stages w/12,475,840 gals of SW, carrying 5,109,00# Local 100 Mesh Sand & 5,167,670#, 40/70 Local sand.

Flowback well for cleanup.

04/26/19 Put well on production.

We are asking for an exemption from tubing at this time.

Bond on file: NM1693 nationwide & NMB000919

14. I hereby certify that the foregoing is true and correct.

**Electronic Submission #464530 verified by the BLM Well Information System
For MEWBOURNE OIL COMPANY, sent to the Hobbs**

Name (Printed/Typed) RUBY O CABALLERO	Title REGULATORY
Signature (Electronic Submission)	Date 05/08/2019

THIS SPACE FOR FEDERAL OR STATE OFFICIAL SIGNATURE

Approved By _____	Title _____
Conditions of the approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	Office _____

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Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly to make any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction, or to make any such statement or representation with intent to defraud, or to obtain anything of value from any department or agency of the United States.

(Instructions on page 2)

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

HOBBS OGD
MAY 10 2019
RECEIVED

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other		5. Lease Serial No. NMNM27507	
b. Type of Completion <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resvr. Other _____		6. If Indian, Allottee or Tribe Name	
2. Name of Operator MEWBOURNE OIL COMPANY		7. Unit or CA Agreement Name and No.	
Contact: JACKIE LATHAN E-Mail: jlathan@mewbourne.com		8. Lease Name and Well No. RED HILLS WEST 21 W1AP FED COM 2H	
3. Address PO BOX 5270 HOBBS, NM 88241		9. API Well No. 30-025-45247	
3a. Phone No. (include area code) Ph: 575-393-5905		10. Field and Pool, or Exploratory UPPER WOLFCAMP	
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At surface NENE 185FNL 620FEL At top prod interval reported below NENE 281FNL 384FEL At total depth SESE 108FSL 354FEL		11. Sec., T., R., M., or Block and Survey or Area Sec 21 T26S R32E Mer	
14. Date Spudded 12/06/2018		15. Date T.D. Reached 12/29/2018	
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 04/26/2019		17. Elevations (DF, KB, RT, GL)* 3161 GL	
18. Total Depth: MD 17035 TVD 12138		19. Plug Back T.D.: MD 17020 TVD 12138	
20. Depth Bridge Plug Set: MD TVD			

21. Type Electric & Other Mechanical Logs Run (Submit copy of each) NONE		22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Directional Survey? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Submit analysis)	
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23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sks. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17.500	13.375 J55	54.5	0	715		600	172		
12.250	9.625 HCL80	40.0	0	4365		1300	392		
8.750	7.000 HCP110	29.0	0	12274		800	336		
8.750	4.500 HCP110	13.5	11439	16995		300	138		

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)

25. Producing Intervals			26. Perforation Record			
Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) WOLFCAMP	11672	16820	12263 TO 16995	0.390	1404	OPEN
B)						
C)						
D)						

27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
12263 TO 16995	12,475,840 GALS SLICKWATER, CARRYING 6,109,000# LOCAL 100 MESH SAND & 5,167,670# LOCAL 40/70 SAND

28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
04/26/2019	04/28/2019	24	→	525.0	1373.0	1703.0	44.0		FLOWS FROM WELL
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
20/64	SI	3225.0	→	525	1373	1703	2615	POW	

28a. Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Ga Gra
			→					
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well
	SI		→					

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