

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

Form C-103
Revised July 18, 2013

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

HOBBS OCD
RECEIVED
JUN 18 2019

| |
|---|
| WELL API NO. 30-025-45343 |
| 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 Charolais 28/21 B1MD State Com |
| 8. Well Number 2H ✓ |
| 9. OGRID Number 14744 |
| 10. Pool name or Wildcat Pearl; Bone Spring, 49680 |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3721' 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 Gas Well Other

2. Name of Operator
Mewbourne Oil Company

3. Address of Operator
PO Box 5270, Hobbs NM 88241

4. Well Location
Unit Letter M : 205 feet from the South line and 1310 feet from the West line
Section 28 Township 19S Range 35E NMPM Lea County

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.

06/24/2019

TD'ed 6 1/8" hole @ 19570' MD. Ran 19563' of 4 1/2" 13.5# HCP110 BPN csg. Cmt w/600 sks Class H (50:50:10) w/additives. Mixed @ 11.9#/g w/2.48 yd. Released dart. Displaced w/255 bbls FW. Plug down @ 12:00 P.M. 06/06/19. Bump plug w/1600#. Set packer w/75k#. & release from liner. Displaced 7" csg w/300 bbls FW. Circ 169 sks of cmt off of liner top to the pit. At 1:00 P.M., 06/06/19, test liner top to 2500# for 30 mins, held OK. Top of liner @ 9061'.

Rig released on 06/08/19 @ 3:45 AM

Spud Date: 05/07/19

Rig Release Date: 06/08/2019

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE R Caballero TITLE Regulatory DATE 06/11/19

Type or print name Ruby Caballero E-mail address: rcaballero@mewbourne.com PHONE: 575-393-5905

For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 06/24/19
Conditions of Approval (if any):