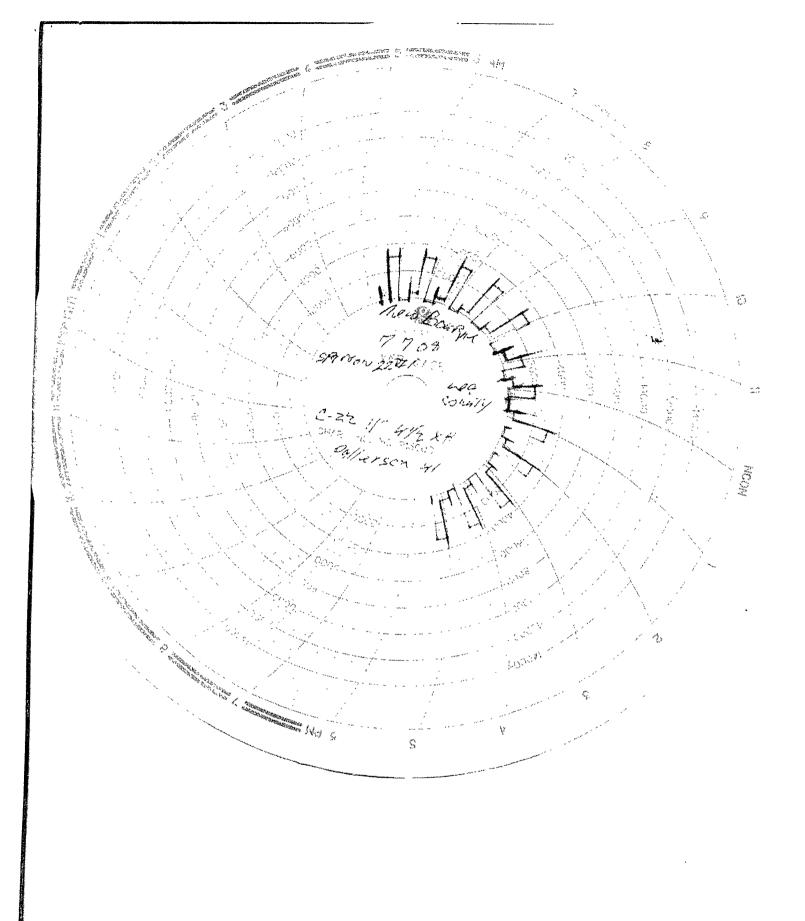
Submit 3 Copies To Appropriate District	State of New Mexico	Form C-103					
Office District I	nergy: Minerals and Natural Resource	May 27, 2004					
1625 N. French Dr., Hobbs, NM 8822		20.025.29620					
<u>District II</u>	III CONSERVATION DIVISION	5. Indicate Type of Lease					
1301 W. Grand Ave., Artesia, NM 88210 District III 1000 R10 Brazos Rd., Aztec, NM 87410 JUL A District IV	2001220 South St. Francis Dr.	STATE FEE					
1000 Rio Brazos Rd., Aztec, NM 8/410 JUL III S	Santa Fe, NM 87505	6. State Oil & Gas Lease No.					
1220 S. St. Francis Dr., Santa He, NM	1220 S. St. Francis Dr., Santa H., NA						
	NO REPORTS ON WELLS	7. Lease Name or Unit Agreement Name					
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A							
DIFFERENT RESERVOIR. USE "APPLICATION PROPOSALS.)	8. Well Number						
1. Type of Well: Oil Well X Gas We	1						
2. Name of Operator		9. OGRID Number					
Mewbourne Oil Company	/	14744 10. Pool name or Wildcat					
3. Address of Operator		Pearl: Bone Spring 49680					
PO Box 5270 Hobbs, NM 88241		Team. Bone oping 19000					
4. Well Location	o o o o o o o o o o o o o o o o o o o	750 fact from the W line					
l .	_feet from theS line and _						
Section 22	Township 19S Range	35E NMPM Lea County					
3741	levation (Show whether DR, RKB, RT, Gi	(, etc.)					
Pit or Below-grade Tank Application ☐ or Closur		Principle (1) (Section 1) Laboratory Control of Control					
		Distance from nearest surface water					
		ls; Construction Material					
THE DIME! THIS HAD A							
12. Check Approp	oriate Box to Indicate Nature of No	Mice, Report of Other Data					
NOTICE OF INTENT	TION TO:	SUBSEQUENT REPORT OF:					
PERFORM REMEDIAL WORK ☐ PLUC	WORK ☐ ALTERING CASING ☐						
	The second secon						
		_					
PULL OR ALTER CASING MUL	TIPLE COMPL CASING/CE	EMENT JOB 🛚 🗵					
OTHER:	OTHER:						
13. Describe proposed or completed or	perations. (Clearly state all pertinent deta	ils, and give pertinent dates, including estimated date					
	EE RULE 1103. For Multiple Completion	ns: Attach wellbore diagram of proposed completion					
or recompletion.							
06/28/08 MI & snud 17 1/3" hole Ran 511	' 13 3/8" 48# H40 ST&C csg. Cemented w	rith 550 sks BJ Lite Class C with additives.					
06/28/08MI & spud 17 ½" hole. Ran 511' 13 ¾" 48# H40 ST&C csg. Cemented with 550 sks BJ Lite Class C with additives. Mixed @ 14.8 #/g w/ 1.34 yd. Circ 138 sks to pits. WOC 18 hrs. At 9:30 am on 06/30/08, tested 13 ¾" casing to 1250# for 30 minutes,							
held OK. Drilled out with 12 ¼" bit.	•						
07/06/08TD'ed 12 '/" hole @ 3521'. Ran 3521' 8 %" 32# J55 LT&C Csg. Cemented w/1000 sks BJ Lite Class C (35:65:6)							
with additives. Mixed @ 12.5/g w/ 2.01 yd. Tail w/400 sks Class C with 1% CaCl2. Mixed @ 14.8 #/g w/ 1.34 yd. Circ 110 sks to pit. WOC 18 hrs. Tested BOPE to 3000# and annular to 1500#. At 5:30 pm 07/07/08, tested csg to 1500# for 30 mins,							
held OK. Test formation to 11.0# MWE. Charts and schematic attached. Drilled out with 8 3/4" bit.							
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-							
grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan.							
SIGNATURE Jacke Fat	TITLE_Hobbs Regulat	oryDATE07/08/08					
Type or print name Jackie Lathan	E-mail address:	Telephone No. 575-393-5905					
For State Use Only	_						
APPROVED BY: (his Usel)	7. OF DISTRICT OF INCOME.	JUL 15 2008					
0.000	THEE MICH SUPERVIS	OR/GENERAL MANAGERDATE					
Conditions of Approval (if any):							



MASTER PRINTERS 575.396,3661

~ WELDING • BOP TESTING NIPPLE UP SERVICE • BOP LIFTS • TANDEM MUD AND GAS SEPARATORS

INVOICE

R 22 3

WELDING SERVICE	S Gra	nd Junction, CO 970-241-4540	Lovington, NM 575-396-4540	. * . U	
Company July BD40	8/4 811	Date	Mr Maria	Start Time <u>&</u>	, √ []am []r
Lease SPARROW ZZ	#/			County	
Company Man Charles E Wa	John E.				
Welihead Vendor	2	Tester_	Tim Ermi		
Drlg. Contractor Patterson	· · · · · · · · · · · · · · · · · · ·		, e ^e **	Rig #	r p
Tool Pusher			¥	•	
Plug Type 2 2		Plug Size	And the same of th	Drill Pipe Size	
Casing Valve Opened	¥ <u>S</u>		Check Valve Open_		
ANNULAR 15 RAMS 12 RAMS 13 RAMS 14 Check	26, 22, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4,	Rotating Head	24	19	77
9 (10)	(12, (2), (3), (3)		£. 12	₩ _20	,16
TEST # ITEMS TESTED	TEST LENGTH			REMARKS	
1,25,6,26,13	1010	250 3000	7		
2 9.1.5,2.13	16/0	1250 Bar	,		
3 10,3,54,13	16/10	350 300	1		
4 10,8,14	10 10	250 300			
5 14 19	40/42	200 300			
4,7,15	10 10	250 /500			
· · · · · · · · · · · · · · · · · · ·	101.10	252 200g	,		-
9 16	10/10	250 30a	;		
9 16	10 10	250 500			
18 19	10/10	250 3000			
11 19	10 10	250 300		27	
12 12	10 10	250 300		7/16	
	The state of the s			TIBLE	
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HR@ /200	122				
HR@	Mr. Marchaella	6~	;	SUB TOTAL TAX	
longo () di a () di				TAX 👑 🐔	64°

MAIN WELDING SERVICES, INC.

Company Meers Boukh	Date		
Lease S. Pa M. Row (22 July)	_County_	hand of	
Drilling Contractor Father Son 41	_Plug & Di	rill Pipe Size_	Comment of the second
Accumulator Fun To Check - USABLE FLUID IN THE NITROG Make sure all rams and annular are open an Ensure accumulator is pumped up to working	EN BOTT	LES (III.A.)	2.c.i. or ii or iii)
 Open HCR Valve. (If applicable) Close annular. Close all pipe rams. 			
 4. Open one set of the pipe rams to simulate 5. For 3 ram stacks, open the annular to ach 6. Record remaining pressure per a. (950 psi for a 1500 psi system) b 	nieve the 50 si. Test Fai	+ % safety fa	e is lower than required

To Check - PRECHARGE ON BOTTLES OR SPHERICAL (III.A.2.d.)

7. If annular is closed, open it at this time and close HCR.

- Start with manifold pressure at, or above, maximum acceptable pre-charge pressure:
 a. {800 psi for a 1500 psi system}
 b. {1100 psi for 2000 and 3000 psi system}
 - 1. Open bleed line to the tank, slowly. (gauge needle will drop at the lowest bottle pressure)
 - 2. Close bleed line. Barely bump electric pump and see what pressure the needle jumps up to.
- 3. Record pressure drop 1500 psi. Test fails if pressure drops below minimum.
- Minimum: a. {700 psi for a 1500 psi system } b. {900 psi for a 2000 & 3000 psi system}

To Check - THE CAPACITY OF THE ACCUMULATOR PUMPS (III.A.2.f.)

- Isolate the accumulator bottles or spherical from the pumps & manifold.
- Open the bleed off valve to the tank, {manifold psi should go to 0 psi} close bleed valve.
 - 1. Open the HCR valve, {if applicable}
 - 2. Close annular
 - 3. With pumps only, time how long it takes to regain the required manifold pressure.
 - 4. Record elapsed time ______. Test fails if it takes over 2 minutes.
- **a.** {950 psi for a 1500 psi system} **b.** {1200 psi for a 2000 & 3000 psi system}