Submit 3 Copies To Appropriate District State of New Mexico	Form C-103		
Office Energy, Minerals and Natural Resources	May 27, 2004		
1625 N. French Dr., Hobbs, NM 88240	WELL API NO.		
District II OIL CONCEDIA TION DIVISION	30-0 25- 39131		
1301 W. Grand Ave., Artesia, NW 66210	5. Indicate Type of Lease		
1000 P. D. D. 1 A NM 07410	STATE FEE X		
District IV Santa Fe, NM 87505	6. State Oil & Gas Lease No.		
1220 S. St. Francis Dr., Santa Fe, NM			
87505 SUNDRY NOTICES AND 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	Sparrow 27		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH	8. Well Number		
PROPOSALS.)	a. Well Nulliber		
1. Type of Well: Oil Well X Gas Well Other			
2. Name of Operator	9. OGRID Number		
Mewbourne Oil Company	14744		
3. Address of Operator	10. Pool name or Wildcat		
PO Box 5270 Hobbs, NM 88241	Pearl: Bone Spring 49680		
4. Well Location			
Unit LetterJ:1770_feet from theS line and	1980 feet from the E line		
_ 11 100 D	5E NMPM Lea County		
11. Elevation (Show whether DR, RKB, RT, GR,	etc.)		
3700' GL Pit or Below-grade Tank Application □ or Closure □	Section 2 The section of the section		
	This is a second of the second		
Pit typeDepth to GroundwaterDistance from nearest fresh water well	, I		
Pit Liner Thickness: mil Below-Grade Tank: Volume bbls;	Construction Material		
12. Check Appropriate Box to Indicate Nature of Noti	ce Report or Other Data		
12. Check Appropriate Box to indicate Nature of Non	oc, Report of Other Butt		
NOTICE OF INTENTION TO:	UBSEQUENT REPORT OF:		
1401102 01 1112111011 101			
TENT OF WITH EMPERIEUR	<u> </u>		
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS. ☐ P AND A ☐		
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEM	MENT JOB		
FOLE ON ALTER GAGING			
OTHER: OTHER:			
13 Describe proposed or completed operations. (Clearly state all pertinent details	s, and give pertinent dates, including estimated date		
of starting any proposed work). SEE RULE 1103. For Multiple Completions:	: Attach wellbore diagram of proposed completion		
or recompletion.			
•			
12/01/08MI & spud 17 1/2" hole. Ran 532' 13 3/8" 48# H40 ST&C csg. Cemented with	h 550 sks BJ Lite Class C with 1% CaCl2.		
Mixed @ $14.8 \#/g \text{ w}/ 1.32 \text{ yd}$. Circ 71 sks to pits. At 1:00 am on $12/03/08$,	tested BOPE & casing to 1250# for 30 minutes,		
held OK. Drilled out with 12 ¼" bit.			
12/07/08TD'ed 12 1/4" hole @ 3480'. Ran 3480' 8 1/8" 32# K55 LT&C Csg. Cemented	l w/1000 sks BJ Lite Class C (35:65:6)		
with additives. Mixed @ 12.5/g w/ 2.02 yd. Tail w/400 sks Class C with 19	% CaCl2. Mixed @ 14.8 #/g w/ 1.33 yd. Plug		
down 2:00 am 12/08/08. Circ 115 sks of cmt to pit. WOC 18 hrs. Tested BO	OPE to 3000# and annular to 1500#. At 10:30 am		
12/09/08, tested csg to 1500# for 30 mins, held OK. Charts and schematic att	ached. Drilled out with / //8" bit.		
I hereby certify that the information above is true and complete to the best of my know	ledge 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 perm	it ∐ or an (attached) alternative OCD-approved plan ∐.		
CYCLY TYPE (A. 1. Y. A.)	yDATE12/19/08		
SIGNATURE Cather TITLE Hobbs Regulator	yDATE_12/19/08		
Type or print name	irne.com Telephone No. 575-393-5905		
For State Use Only	ENGINEER IANA 2009		
APPROVED BY: TITLE	DATE JANO6 2009		
Conditions of Approval (if any):			
COMMINIOUS OF ADDITOVALLIT AUVI. 1 /			



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

V2 B09739

INVOICE

MUD AND GAS SEPARATORS

Lovington, NM • 575-396-4540

Company filewhouse 6 00			_ Date_ <i>I</i> <	3-8-08	Start Time	am 🖅 pm
Lease Sparkow 17-7	# &	•			County <u>design</u>	State <i>_/_</i> _
Company Man Naul Nase F	L= '					
Wellhead Vendor						
Drlg. Contractor Pallerson Di	WILLIAM 9				Rig #	
Tool Pusher 13111 31711 Th						, ,
Plug Type 2 22-		PI	ug Size_ <i>_/_</i>	<u>/ / · </u>	Drill Pipe Size	1/2
Casing Valve Opened			Q- 1	Check Valve Or	oen	*14
ANNULAR 15 1500 PARAMS 12 BANS 13	26 2 4 5 5	Rotati	ng Head	24 → 22 → X	19	17
Check Valve 11	3 3 1 25	↑ 6		21	18 20	16
TEST # ITEMS TESTED	TEST LENGTH	LOW PSI	HIGH PSI		REMARKS	
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MASTER PRINTERS 575 396 3661						

