Submit 1 Copy To Appropriate District Office	State of New Me		Form C-103	
District I	Energy, Minerals and Natu		October 13, 2009 WELL API NO.	
1625 N. French Dr., Hobbs, NM 88240 District II	25 N. French Dr., Hobbs, NM 88240 strict II 01 W. Grand Ave., Artesia, NM 88210 strict III 1220 South St. Francis Dr.			
1301 W. Grand Ave., Artesia, NM 88210	1301 W. Grand Ave., Artesia, NM 88210			of Lease
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE	FEE X
District IV		7505	6. State Oil & Ga	
1220 S. St. Francis Dr., Santa Fe, NM HO [87505	3BSQCD			
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name o	r Unit Agreement Name
(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			Ralph Estate	
PROPOSALS.) 1. Type of Well: Oil Well X Gas Well Other			8. Well Number 2	/
2. Name of Operator			9. OGRID Numb	ner /
Mewbourne Oil Company	/		14744	/
3. Address of Operator		10. Pool name or Wildcat		
PO Box 5270, Hobbs, NM 88241			D-K Abo	
4. Well Location				/
Unit Letter_G:	1980'_feet from the _North			the _Eastline
Section 30	Township 20S	Range 39E	NMPM L	ea County
	11. Elevation <i>(Show whether DR,</i> 3549' GL	RKB, RT, GR, etc.)		
12. Check Ap	propriate Box to Indicate N	ature of Notice, I	Report or Other	Data
NOTICE OF INT	ENTION TO:	SUBS	SEQUENT RE	PORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR				ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRIL	LING OPNS.	P AND A
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	JOB 🗆	
DOWNHOLE COMMINGLE				
OTHER:		OTHER: Put well I		
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.				
proposed completion or recon	ipletion.			
02/24/11 Return well to production.				· ·
			•	
I hereby certify that the information ab	ove is true and complete to the bo	est of my knowledge	and belief.	
Thereby colony that the information as	ove is true and complete to the ov	or or my time models		
SIGNATURE OCTIO	Lathan TITLE HOB	bs Regulatory	DA1	ΓE04/06/11
Type or print name Lackie Lathan	1	lathan@mewbourne		
For State Use Only				
ADDROVED DV		ETHOLEUM BY	Meth	APR 1-1 2011
APPROVED BY:	TITLE		DA	TE

Submit 1 Copy To Appropriate District