

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

NMOCD Artesia

FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010**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.***SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM117116
2. Name of Operator MEWBOURNE OIL COMPANY		6. If Indian, Allottee or Tribe Name
Contact: JACKIE LATHAN E-Mail: jlathan@mewbourne.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address PO BOX 5270 HOBBS, NM 88241	3b. Phone No. (include area code) Ph: 575-393-5905 Fx: 575-397-6252	8. Well Name and No. OWL DRAW 23 DM FED COM 1H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 14 T26S R27E SWSW 375FSL 990FWL		9. API Well No. 30-015-41448
		10. Field and Pool, or Exploratory WOLFCAMP SHALE
		11. County or Parish, and State EDDY COUNTY, NM

## 12. CHECK 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"/> Fracture Treat	<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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Drilling Operations
	<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 recomple horizontally, give subsurface locations and measured and true vertical depths of all pertinent 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 shall 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 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

09/11/13 TD 8 3/4" @ 10195'. Ran 10195' of 7" 26# P110 BT&C csg. Cemented with 700 sks EconoCem-HLC w/additives. Mixed @ 12.5 #/g w/2.02 yd. Tail w/300 sks HalCem-H w/additives. Mixed @ 15.6#/g w/1.19 yd. Plug down @ 10:45 PM 09/11/13. Did not circ cement. Lift pressure @ 1400# @ 2 BPH. Tested annular to 2500#. At 11:45 AM 09/14/13, tested csg to 1500# for 30 mins, held OK. Drilled out with 6 1/8" bit.

Chart &amp; Schematic attached.

Bond on file: NM1693, Nationwide &amp; NMB000919

verify TOC on 7" submit results to  
BLM.

Accepted for record

NMOC

9/30/13

RECEIVED

SEP 25 2013

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

Electronic Submission #220265 verified by the BLM Well Information System  
For MEWBOURNE OIL COMPANY, sent to the Carlsbad  
Committed to AFMSS for processing by KURT SIMMONS on 09/18/2013 ()

Name (Printed/Typed) JACKIE LATHAN

Title AUTHORIZED REPRESENTATIVE

Signature (Electronic Submission)

Date 09/17/2013

ACCEPTED FOR RECORD

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

Title

Conditions of 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

BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

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

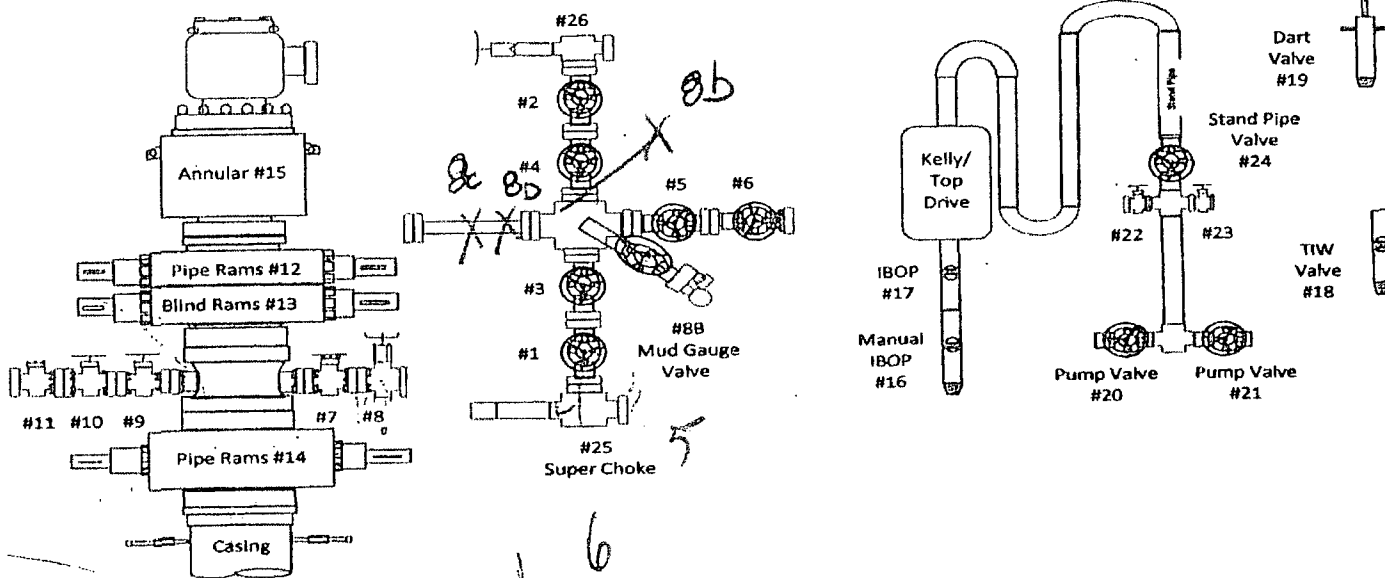
9



Pg. 1 of 2

Company: Murphy Date: 9-13-13 Invoice # 58495  
Lease: OW1 Draw 23 Fed #1H Drilling Contractor: Peterson Rig # 46  
Plug Size & Type: 11" C22 Drill Pipe Size: 3 1/2" IF Tester: RAU  
Required BOP: \_\_\_\_\_ Installed BOP: \_\_\_\_\_

**\* Check Valve Must Be Open/Disabled To Test Kill Line Valves \***

[illegible]

