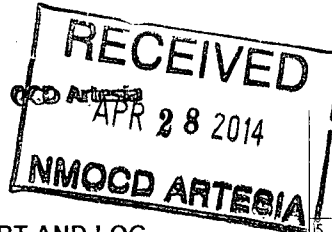


UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT



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FORM APPROVED  
OMB NO. 1004-0137  
Expires: October 31, 2014

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other						5. Lease Serial No. NMNM27278 (SL) LC-064226			
b. Type of Completion: <input type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resvr., Other:						6. If Indian, Allottee or Tribe Name			
2. Name of Operator Mewbourne Oil Company						7. Unit or CA Agreement Name and No.			
3. Address PO Box 5270, Hobbs NM 88241				3a. Phone No. (include area code) (575) 393-5905		9. API Well No. 30-015-39581			
4. Location of Well (Report location clearly and in accordance with Federal requirements)*  At surface 147' FSL & 223' FWL Unit M  At top prod. interval reported below 525' FNL & 691' FWL  At total depth 683' FSL & 446' FEL Unit P						10. Field and Pool or Exploratory Leo South; Bone Spring 39720 11. Sec., T., R., M., on Block and Survey or Area Sec 27, T18S, R30 12. County or Parish Eddy 13. State NM			
14. Date Spudded 01/01/14		15. Date T.D. Reached 01/22/14		16. Date Completed 03/27/14 <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod.		17. Elevations (DF, RKB, RT, GL)* 3433'			
18. Total Depth: MD 12990' TVD 8386'		19. Plug Back T.D.: MD 12961' TVD 8386'		20. Depth Bridge Plug Set: MD NA TVD NA		22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit report) Directional Survey? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Submit copy)			
21. Type Electric & Other Mechanical Logs Run (Submit copy of each) GR, CNL & CCL									
23. Casing and Liner Record (Report all strings set in well)									
Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sks. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17 1/2"	13 3/8" H40	48#	0	396'		450	107	Surface	NA
12 1/4"	9 5/8" J55	36#	0	1620'		500	165	Surface	NA
8 3/4"	7" P110	26#	0	8687'		1000	331	Surface	NA
6 1/8"	4 1/2" P110	13.5#	8447'	12978'	Liner	NA	NA	NA	NA
24. Tubing Record									
Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	
2 7/8"	7929'	NA							
25. Producing Intervals									
Formation		Top	Bottom	26. Perforation Record		Size		No. Holes	Perf. Status
A) Bone Spring		5462'	12990'	8762' - 12961' MD		Ports		20	Open
B)				8357' - 8385' TVD					
C)									
D)									
27. Acid, Fracture, Treatment, Cement Squeeze, etc.									
Depth Interval		Amount and Type of Material							
8762' - 12961'		Frac w/300,846 gals slickwater, 214,032 gals 20# Linear gel, 784,182 gals 20#-X-Link gel carrying 98,206# 100-Mesh, 1,626,654# 20/40 white sand & 369,041# 20/40SB Excel sand.							
28. Production - Interval A									
Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
03/27/14	03/28/14	24 hrs	→	505	235	1190	41	.779	ESP
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
NA	420	80	→	805	235	1190	465	Producing	
28a. Production - Interval B									
Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
			→						

ACCEPTED FOR RECORD

APR 19 2014

BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE

RECLAMATION  
DUE 9-27-ref

\*(See instructions and spaces for additional data on page 2)

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## 28b. Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	

## 28c. Production - Interval D

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	

## 29. Disposition of Gas (Solid, used for fuel, vented, etc.)

## 30. Summary of Porous Zones (Include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

## 31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth
				Top of Salt	598'
				Base of Salt	1455'
				Yates	1651'
				Seven Rivers	1970'
				Queen	2770'
				Grayburg	3182'
				San Andres	3370'
				Delaware	4000'
				Bone Spring	5462'

## 32. Additional remarks (include plugging procedure):

## 33. Indicate which items have been attached by placing a check in the appropriate boxes:

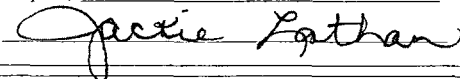
- ☒ Electrical/Mechanical Logs (1 full set req'd.)     
 ☐ Geologic Report     
 ☐ DST Report     
 ☒ Directional Survey  
☐ Sundry Notice for plugging and cement verification     
 ☐ Core Analysis     
☒ Other: Comp sundry, Dev rpt, C104, Gyro, Final C102, C144 CLEZ, pkr port

## 34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions)\*

Name (please print) Jackie Lathan

Title Regulatory

Signature



Date 03/31/14

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.

(Continued on page 3)

(Form 3160-4, page 2)