

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

## NM OIL CONSERVATION

ARTESIA DISTRICT

FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010SUNDRY 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.

RECEIVED

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

## 1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

## 2. Name of Operator

MEWBOURNE OIL COMPANY

Contact: JACKIE LATHAN

E-Mail: jlathan@mewbourne.com

## 3a. Address

P O BOX 5270  
HOBBS, NM 88241

## 3b. Phone No. (include area code)

Ph: 575-393-5905

## 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 19 T23S R27E NENE 185FNL 710FEL  
32.296940 N Lat, 104.222478 W Lon5. Lease Serial No.  
NMNM0540701

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.  
JESTER 19 W2AP FED COM 1H9. API Well No.  
30-015-42830-00-X110. Field and Pool, or Exploratory  
FOREHAND RANCH, Wolfcamp (gas)

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 checked="" 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 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
	<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 recompleat 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.)

MOC has an approved APD for the above subject well. MOC would like to change the well name to Jester-19/30-WOAH-Fed Com #1H as well as change the BLM. Please see attached for details. Please call Jake Nave with any questions.

Bond on file: NM1693 nationwide &amp; NMB000919

Bond on file: 22015694 nationwide &amp; 022041703 Statewide

Original COAs still stand.  
- now cementing 4 1/2" liner - 23% excess may need additional cement.

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

Electronic Submission #297674 verified by the BLM Well Information System

For MEWBOURNE OIL COMPANY, sent to the Carlsbad

Committed to AFMSS for processing by JENNIFER SANCHEZ on 04/09/2015 (15JAS0324SE)

Name (Printed/Typed) JACKIE LATHAN

Title AUTHORIZED REPRESENTATIVE

Signature

(Electronic Submission)

Date 04/08/2015

APPROVED

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

Title

APR 9 2015

Date

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.

\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\*

ATS- 14-852.

District I  
1625 N. French Dr., Hobbs, NM 88240  
Phone: (575) 393-6161 Fax: (575) 393-0720  
District II  
811 S. First St., Artesia, NM 88210  
Phone: (575) 748-1283 Fax: (575) 748-9720  
District III  
1000 Rio Brazos Road, Aztec, NM 87410  
Phone: (505) 334-6178 Fax: (505) 334-6170  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505  
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico  
Energy, Minerals & Natural Resources Department  
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-102  
Revised August 1, 2011  
Submit one copy to appropriate  
District Office

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

1 API Number <b>3001542030</b>		2 Pool Code <b>76780</b>		3 Pool Name <b>FOREHAND RANCH Southwest</b>	
4 Property Code <b>314816</b>		5 Property Name <b>JESTER 19/30 WOAHD FED COM</b>			6 Well Number <b>1H</b>
7 GRID NO. <b>14744</b>		8 Operator Name <b>MEWBOURNE OIL COMPANY</b>			9 Elevation <b>3192'</b>
10 Surface Location					
UL or lot no. <b>A</b>	Section <b>19</b>	Township <b>23S</b>	Range <b>27E</b>	Lot Idn <b>185</b>	Feet from the <b>NORTH</b>
				Feet From the <b>710</b>	East/West line <b>EAST</b>
				County <b>EDDY</b>	
11 Bottom Hole Location If Different From Surface					
UL or lot no. <b>H</b>	Section <b>30</b>	Township <b>23S</b>	Range <b>27E</b>	Lot Idn <b>2310</b>	Feet from the <b>NORTH</b>
				Feet from the <b>660</b>	East/West line <b>EAST</b>
				County <b>EDDY</b>	
12 Dedicated Acres <b>480</b>		13 Joint or Infill	14 Consolidation Code	15 Order No.	

No allowable will be assigned to this completion until all interest have been consolidated or a non-standard unit has been approved by the division.

<p>16 GEODETIC DATA NAD 27 GRID - NM EAST SURFACE LOCATION N 471761.3 E 534253.5 LAT: 32.29693965° N LONG: 104.22247766° W BOTTOM LOCATION N 464356.7 - E 534311.0 CORNER DATA NAD 27 GRID - NM EAST A: FND BRASS CAP "1943" N 461282.2 - E 529656.0 B: FND BRASS CAP "1943" N 463932.6 - E 529658.0 C: FND BRASS CAP 1943 N 465582.4 - E 529660.5 D: FND BRASS CAP 1943 N 469232.9 - E 529665.1 E: FND BRASS CAP 1943 N 471883.1 - E 529671.5 F: FND 1/2" RBR IN STONE MOUND N 471919.9 - E 532336.8 G: FND PK NAIL IN CL ROAD N 471956.1 - E 534962.0 H: FND PK NAL N 466678.3 - E 534996.8 I: CALCULATED CORNER N 461349.8 - E 534937.9</p>		<p>17 OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division Signature: <i>Bradley Bishop</i> Date: <i>4-8-15</i> Printed Name: <b>BRADLEY BISHOP</b> E-mail Address: _____</p>	
<p>18 SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief. Date of Survey: <b>5-27-14</b> Signature and Seal of Professional Surveyor: <i>Robert M. Howett</i> <b>19680</b> Certificate Number REV: NAME &amp; B.H.</p>		<p><b>19680</b> REV: NAME &amp; B.H.</p>	