

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Cons.  
N.M. DIV-Dist. 2  
1301 W. Grand Avenue  
Artesia, NM 88210

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993  
File Case Designation and Serial No.  
NMNM-093197

C/SF

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT-" for such proposals

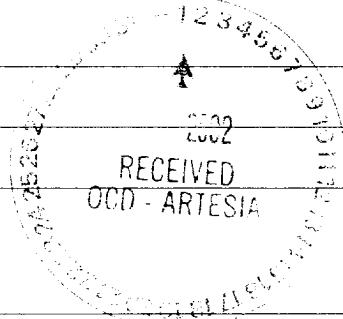
**SUBMIT IN TRIPLICATE**

1. Type of Well  
☐ Oil ☒ Gas ☐ Other  
☐ Well ☒ Well ☐ Other

2. Name of Operator  
Mewbourne Oil Company

3. Address and Telephone No.  
PO Box 5270, Hobbs, N.M. 88241. 505-393-5905

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
1980' FNL & 660' FWL of Sec.35 T-24S R-28E



6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.  
Willow Lake 35 Federal #1

9. API Well No.  
30-015-32306

10. Field and Pool, or Exploratory Area  
Salt Draw Atoka

11. County or Parish, State  
Eddy, N.M.

**12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other TD'ed & Run 5 1/2" csg	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

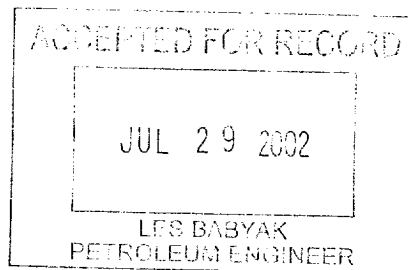
13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

07/05/02...TD'ed 8 3/4" hole @ 12170'. Ran E-logs.

07/07/02...Ran 12170' of 5 1/2" P110 & N-80 csg. Cemented w/ 510 sks 65/35 H-Poz w/ additives. Mixed @ 13.0 #/g w/ 1.47 yd. Tailed w/ 405 sks 'H' w/ additives. Mixed @ 15.1 #/g w/ 1.28 yd.

07/08/02...Released Rig.

07/13/02...Ran CCL. TOC @ 9700'.



07/18/02 PM 2:10

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

Signed [Signature] Title N.M. Young District Manager Date 07/18/02

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes 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.

\*See Instruction on Reverse Side