

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Hobbs

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.*5. Lease Serial No.
NMNM105559

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.
NMNM125386X8. Well Name and No.
RED HILLS WEST UNIT 5H9. API Well No.
30-025-41136-00-X110. Field and Pool, or Exploratory
JENNINGS11. County or Parish, and State
LEA COUNTY, NM**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other2. Name of Operator
MEWBOURNE OIL COMPANYContact: JACKIE LATHAN
E-Mail: jlathan@mewbourne.com

3a. Address

HOBBS, NM 88240

3b. Phone No. (include area code)

Ph: 575-393-5905
Fx: 575-397-6252

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

Sec 10 T26S R32E NWNW 330FNL 500FWL

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

TYPE OF SUBMISSION

- ☐
- Notice of Intent
-
- ☒
- Subsequent Report
-
- ☐
- Final Abandonment Notice

TYPE OF ACTION

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Fracture Treat | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <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 | Well Spud |
| <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 recompleat 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.)

06/01/13 Spud 17 1/2". Ran 1045' 13 3/8" 48# J55 ST&C csg. Cemented with 600 sks EconoCem-HLC w/additives. Mixed @ 12.5 #/g w/2.14 yd. Tail w/200 sks HalCem-C w/1% CaCl2. Mixed @ 14.8 #/g w/1.34 yd. Plug down @ 8:15 PM 06/02/13. Circ 110 sks of cement to pit. WOC. At 5:30 PM 06/03/13, tested BOPE & csg to 1250# for 30 mins, held OK. Drilled out with 12 1/4" bit.

Chart & schematic attached.

Bond on file: NM1693 nationwide & NMB000919

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

Electronic Submission #209718 verified by the BLM Well Information System
For MEWBOURNE OIL COMPANY, sent to the Hobbs
Committed to AFMSS for processing by JOHNNY DICKERSON on 06/05/2013 (13JLD0471SE)

Name (Printed/Typed) JACKIE LATHAN

Title AUTHORIZED REPRESENTATIVE

Signature (Electronic Submission)

Date 06/05/2013

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

ACCEPTEDJAMES A AMOS
Title SUPERVISORY EPS

Date 06/24/2013

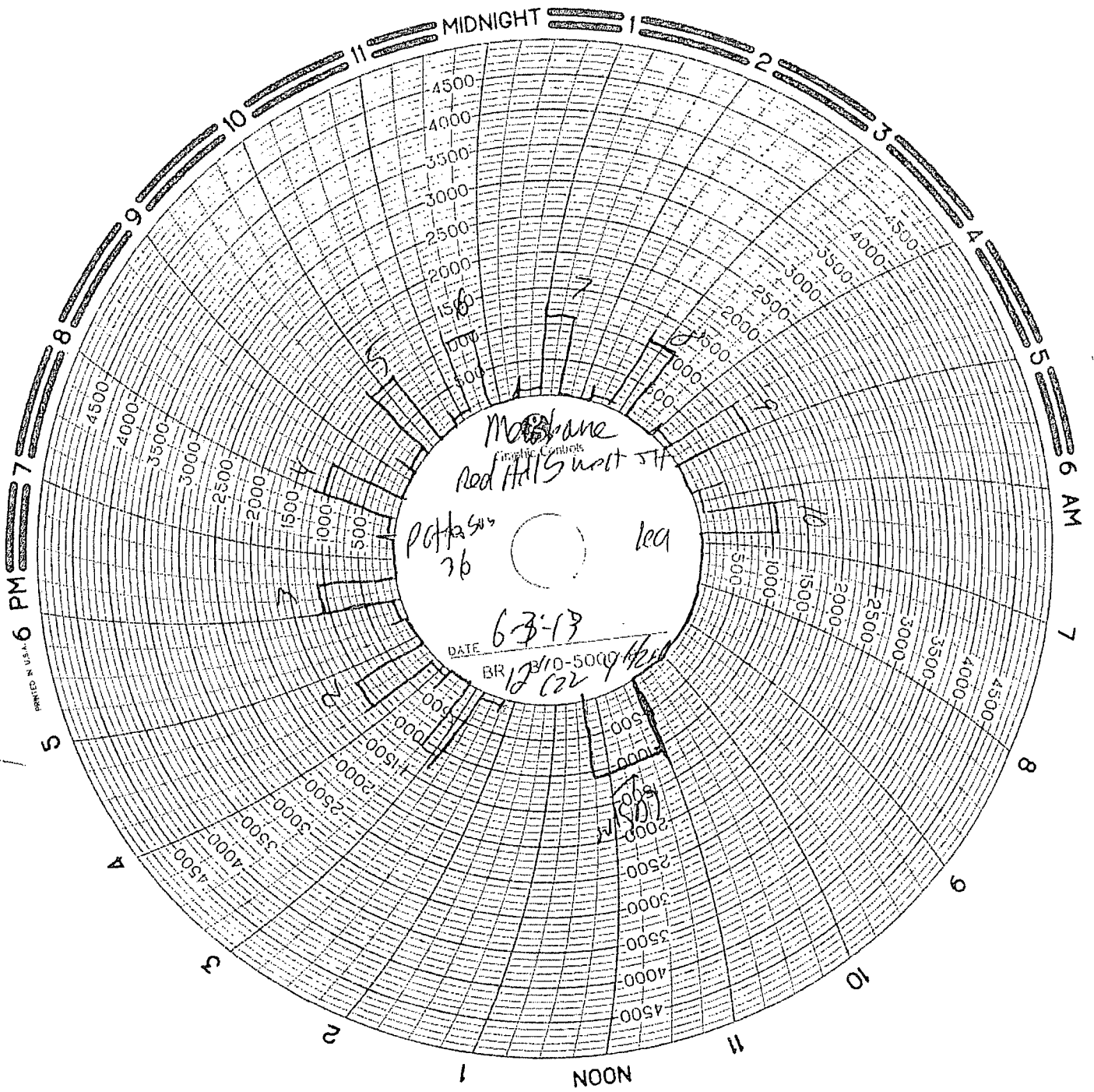
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office Hobbs

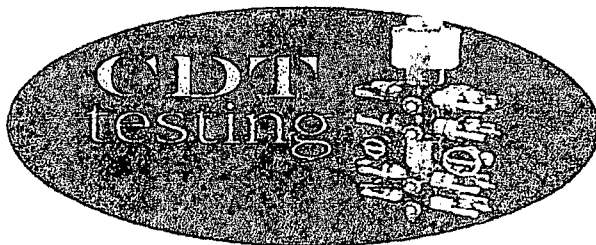
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

JUL 02 2013

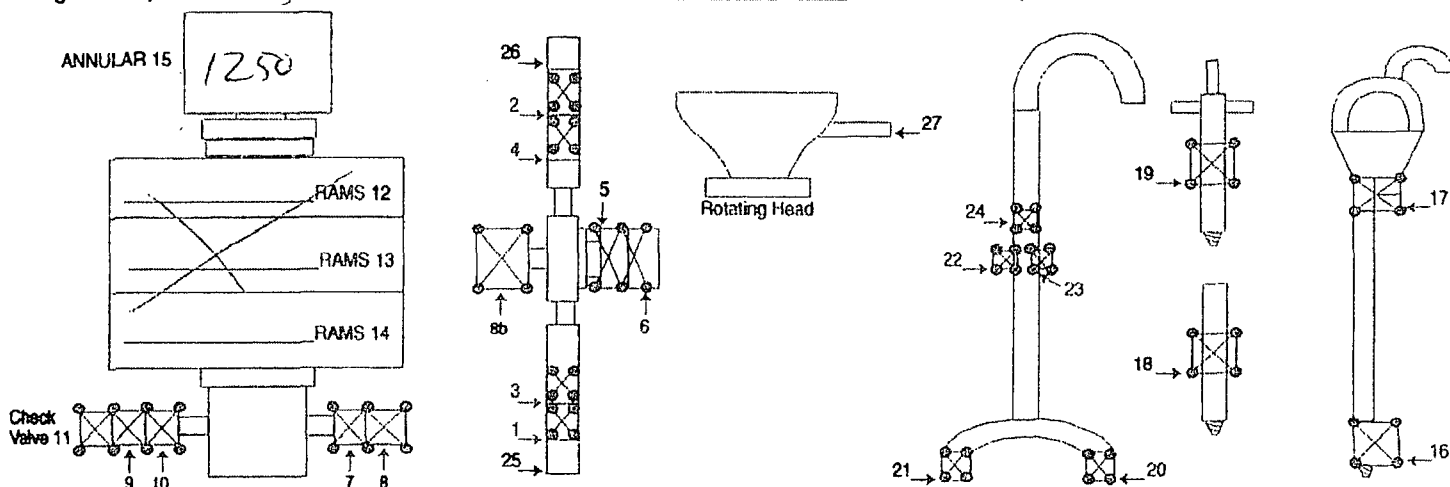


BOP Testing
Todd Martin (575) 441-6163
Chad Villeneuve (575) 317-2075
P.O. Box 3137
Roswell, NM 88202
Office: (575) 420-2341



0117

Company Mewbourne Date 6-8-13 Start Time 2:00 ☐ am ☒ pm
 Lease Red Hills West Unit 5H County Lea State NM
 Company Man Tosh Prosser
 Wellhead Vendor _____ Tester Veel
 Drig. Contractor Patterson Rig # 36
 Tool Pusher Steven Smith
 Plug Type C-22 Plug Size 12" Drill Pipe Size 4 1/2
 Casing Valve Opened Yes Check Valve Open No



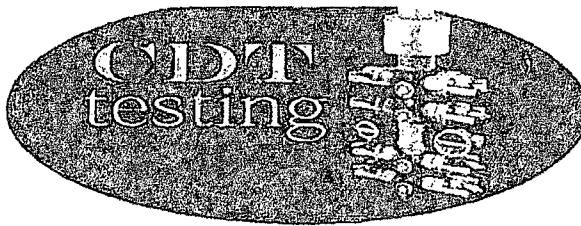
| TEST # | ITEMS TESTED | TEST LENGTH | LOW PSI | HIGH PSI | REMARKS |
|--------|--------------|-------------|---------|----------|---------|
| 1 | 15, 11, 8 | 10-10 | 250 | 1250 | |
| 2 | 15, 9, 7 | 10-10 | 250 | 1250 | |
| 3 | 15, 10, 7 | 10-10 | 250 | 1250 | |
| 4 | 4, 3, 18 | 10-10 | 250 | 1250 | |
| 5 | 2, 1, 6, 8 | 10-10 | 250 | 1250 | |
| 6 | 26, 25, 6, 8 | 10-10 | 250 | 1250 | |
| 7 | 17 | 10-10 | 250 | 1250 | |
| 8 | 16 | 10-10 | 250 | 1250 | |
| 9 | 19 | 10-10 | 250 | 1250 | |
| 10 | 18 | 10-10 | 250 | 1250 | |
| 11 | (Casing) | 10-10 | 250 | 1250 | |
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8 HR @ 1200
 2 HR @ 400
 Mileage 200 @ 1.50

Accumulator test 800 lbs
 Sig. Prosser

SUB TOTAL 2700
 TAX 190
 TOTAL 2890

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0137

Company Newbore Date 6-3-13
Lease Red Hills west unit 57t County Lepa County
Drilling Contractor J. H. Henson 36 Plug & Drill Pipe Size 4 1/2 12" C-22

Accumulator Function Test - OO&GO#2

To Check - **USABLE FLUID IN THE NITROGEN BOTTLES** (III.A.2.c.i. or ii or iii)

- Make sure all rams and annular are open and if applicable HCR is closed.
 - Ensure accumulator is pumped up to working pressure! (Shut off all pumps)
1. Open HCR Valve. (If applicable)
 2. Close annular.
 3. Close all pipe rams.
 4. Open one set of the pipe rams to simulate closing the blind ram.
 5. For 3 ram stacks, open the annular to achieve the 50+ % safety factor. (5M and greater systems).
 6. Record remaining pressure 1200 psi. Test Fails if pressure is lower than required.
 - a. {950 psi for a 1500 psi system} b. {1200 psi for a 2000 & 3000 psi system }
 7. If annular is closed, open it at this time and close HCR.

To Check - **PRECHARGE ON BOTTLES OR SPHERICAL** (III.A.2.d.)

- Start with manifold pressure at, or above, maximum acceptable pre-charge pressure:
 - a. {800 psi for a 1500 psi system} b. {1100 psi for 2000 and 3000 psi system}
1. Open bleed line to the tank, slowly. (gauge needle will drop at the lowest bottle pressure)
 2. Close bleed line. Barely bump electric pump and see what pressure the needle jumps up to.
 3. Record pressure drop 975 psi. Test fails if pressure drops below minimum.
- Minimum: a. {700 psi for a 1500 psi system} b. {900 psi for a 2000 & 3000 psi system}

To Check - **THE CAPACITY OF THE ACCUMULATOR PUMPS** (III.A.2.f.)

- Isolate the accumulator bottles or spherical from the pumps & manifold.
 - Open the bleed off valve to the tank, {manifold psi should go to 0 psi} close bleed valve.
1. Open the HCR valve, {if applicable}
 2. Close annular
 3. With pumps only, time how long it takes to regain the required manifold pressure.
 4. Record elapsed time 33. Test fails if it takes over 2 minutes.
 - a. {950 psi for a 1500 psi system} b. {1200 psi for a 2000 & 3000 psi system}