B SUNDRY Do not use the abandoned we	UNITED STATES EPARTMENT OF THE INT UREAU OF LAND MANAGI NOTICES AND REPOR is form for proposals to d II. Use form 3160-3 (APD)	EMENT TS ON WELLS rill or to re-enter for such prope	Ho	ocd beed	OMB NO	APPROVED). 1004-0137 nuary 31, 2018
SUBMIT IN TRIPLICATE - Other instructions on page 2AUG 2 3 2011					7. If Unit or CA/Agree	ment, Name and/or No.
1. Type of Well ⊠ Oil Well □ Gas Well □ Other					8. Well Name and No. PERRO LOCO 22 B2PA FED 1H	
2. Name of Operator Contact: JACKIE LATHAN MEWBOURNE OIL COMPANY E-Mail: jlathan@mewbourne.com					9. API Well No. 30-025-43393	
3a. Address 3b. Phone No. (include area code) PO BOX 5270 Ph: 575-393-5905 HOBBS, NM 88241 Ph: 575-393-5905					10. Field and Pool or Exploratory Area OJO CHISO	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					11. County or Parish, State LEA COUNTY, NM	
Sec 27 T22S R34E Mer NMP NENE 200FNL 500FEL					LEA COUNTY, NM	
12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA						
TYPE OF SUBMISSION	N TÝPE OF ACTION					
 Notice of Intent Subsequent Report 	 Acidize Alter Casing Casing Repair 	□ Deepen □ Hydraulic □ New Con	-	 Producti Reclama Recomp 		 □ Water Shut-Off □ Well Integrity ☑ Other
□ Final Abandonment Notice	Change Plans	□ Plug and			arily Abandon	
	Convert to Injection	rt to Injection 📄 Plug Back 🗋 Wat		U Water D		
Attach the Bond under which the wo following completion of the involved testing has been completed. Final Al determined that the site is ready for f 08/02/17 RIH w/2 7/8" 6.5# L Started gas lift & PWOL. Bond on file: NM1693 nationw	l operations. If the operation resul bandonment Notices must be filed inal inspection. 80 tbg & GLV's to 9801'	ts in a multiple com	pletion or reco	mpletion in a r	new interval, a Form 3160)-4 must be filed once
14. I hereby certify that the foregoing is Name (Printed/Typed) RUBY CA	Electronic Submission #38	NE OIL COMPÁN ocessing by JEN	Y, sent to th NIFER SANC	Hobbs HEZ on 08/		CORDI
Signature (Electronic S	,	Date				
Approved By Conditions of approval, if any, are attache certify that the applicant holds legal or equ	uitable title to those rights in the si	Titl	e	PUTEN	AUG 10 200	Date TEMENT ICF
which would entitle the applicant to conduct operations thereon. Office CARLSFAD FIELD OFFICE THE STAD FIELD OFFICE THE STATE AND						
(Instructions on page 2) ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED **						