

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Carlsbad Field Office

FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018

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.

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM86710
2. Name of Operator MEWBOURNE OIL COMPANY Contact: JACKIE LATHAN E-Mail: jlathan@mewbourne.com		6. If Indian, Allottee or Tribe Name
3a. Address P O BOX 5270 HOBBS, NM 88241	3b. Phone No. (include area code) Ph: 575-393-5905	7. If Unit or CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 34 T21S R32E SESW 205FSL 1330FWL 32.428539 N Lat, 103.666870 W Lon		8. Well Name and No. BILBREY 34/27 W0MD FED COM 1H
		9. API Well No. 30-025-46262-00-X1
		10. Field and Pool or Exploratory Area WILDCAT;WOLFCAMP
		11. County or Parish, State LEA COUNTY, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input 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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<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	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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

08/02/19

Spud 17 1/2" hole @ 1000'. Ran 985' of 13 3/8" 54.5# J55 ST&C Csg. Cemented with 600 sks Class C w/additives. Mixed @ 13.5#/g w/1.77 yd. Tail w/200 sks Class C w/additives. Mixed @ 14.8#/g w/1.33 yd. Displaced w/145 bbls BW. Plug down @ 10:00 AM 08/03/19. Circ 330 sks of cmt to the pit. Test BOPE to 5000# & Annular to 3500#. At 8:45 P.M. 08/04/19, tested csg to 1500# for 30 mins, held OK. FIT test to 10.5 EMW. Drilled out with 12 1/4" bit.

Charts & Schematic attached.

Bond on file: NM1693 nationwide & NMB000919

14. I hereby certify that the foregoing is true and correct. Electronic Submission #483069 verified by the BLM Well Information System For MEWBOURNE OIL COMPANY, sent to the Hobbs Committed to AFMSS for processing by PRISCILLA PEREZ on 09/12/2019 (19PP3129SE)	
Name (Printed/Typed) RUBY CABALLERO	Title CLERK
Signature (Electronic Submission)	Date 09/12/2019

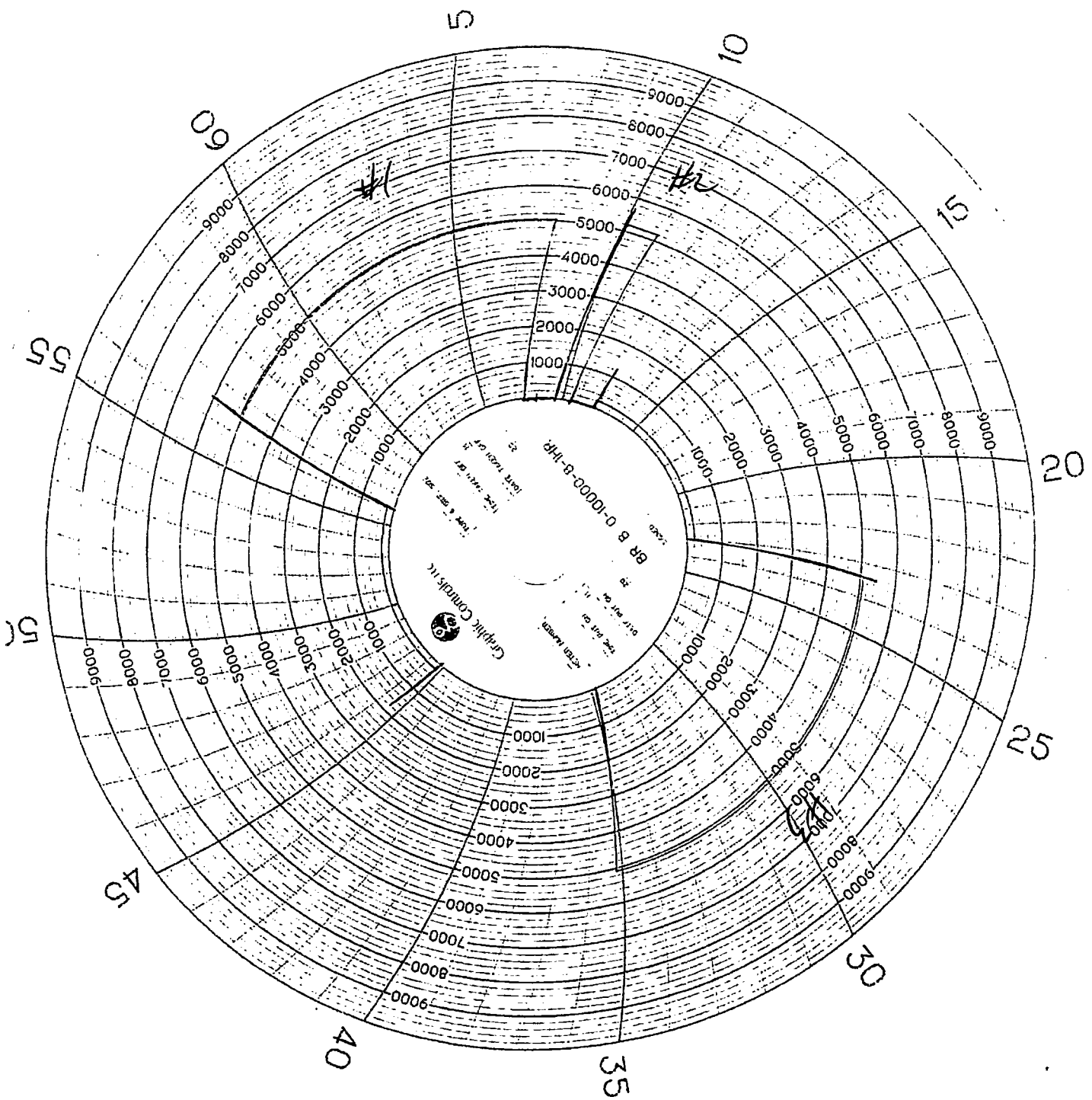
THIS SPACE FOR FEDERAL OR STATE OFFICE USE

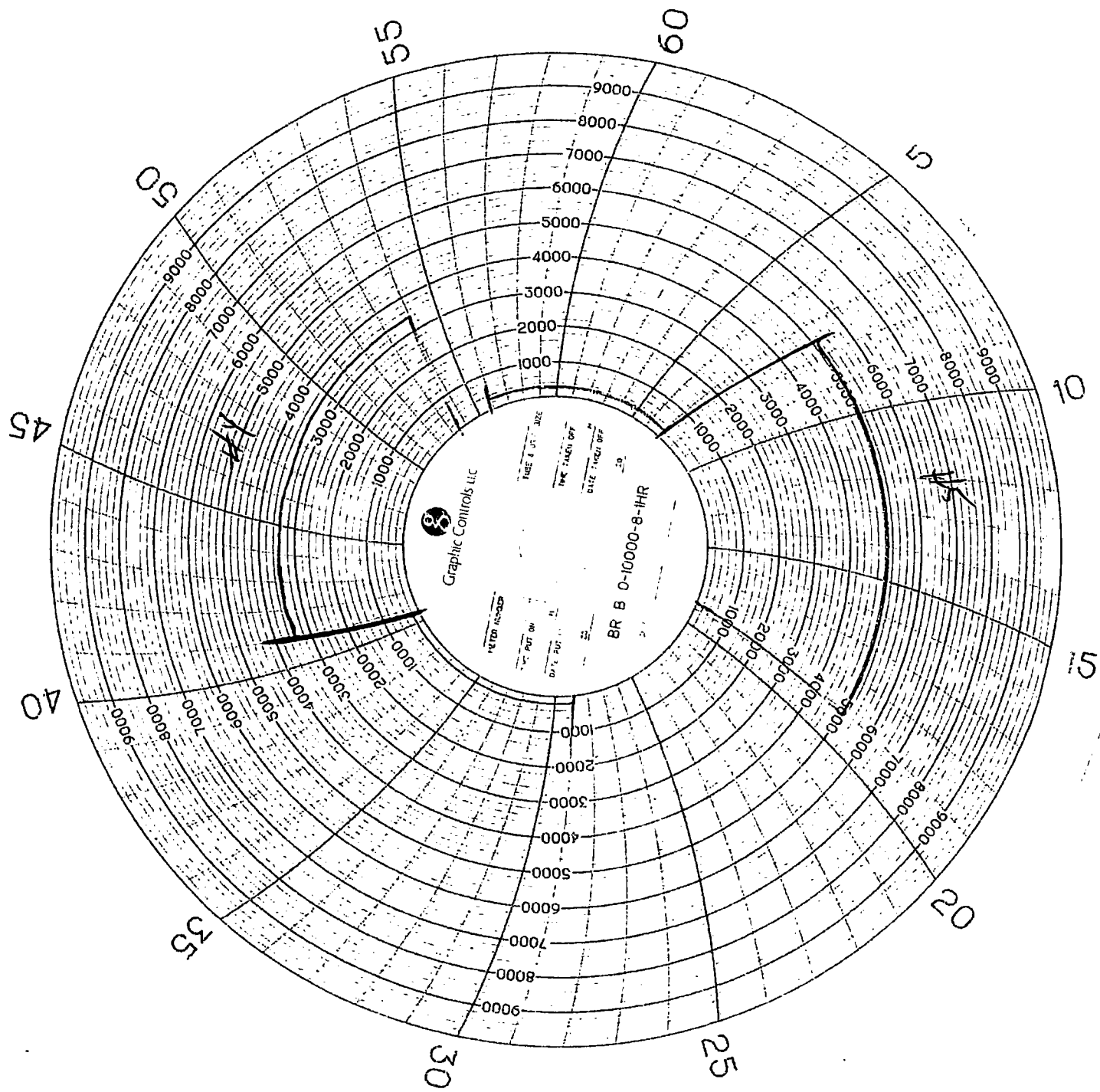
Approved By _____	Title _____	Accepted for Record SEP 12 2019
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	Jonathon Shepard Carlsbad Field Office	
	Office	

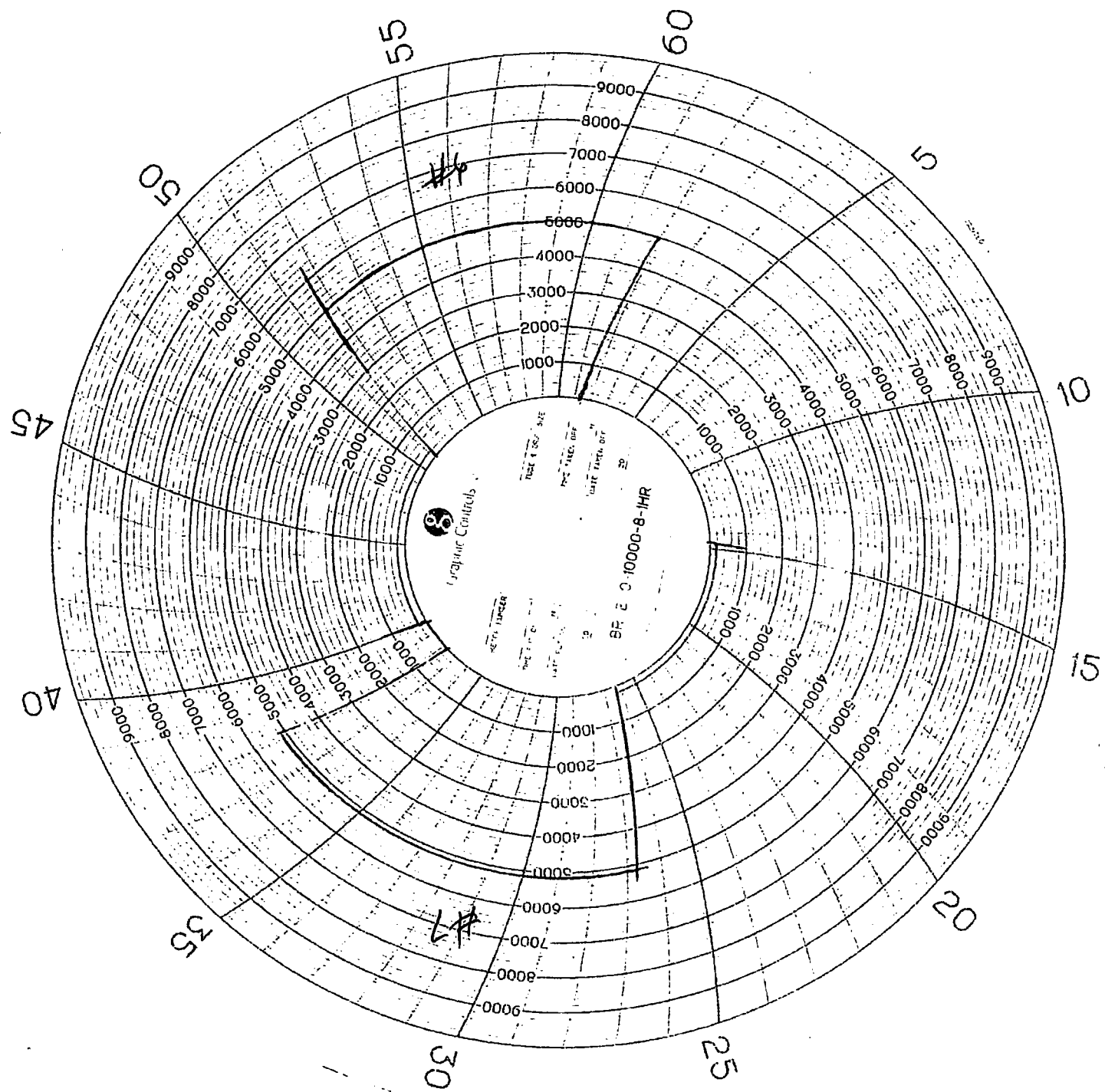
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

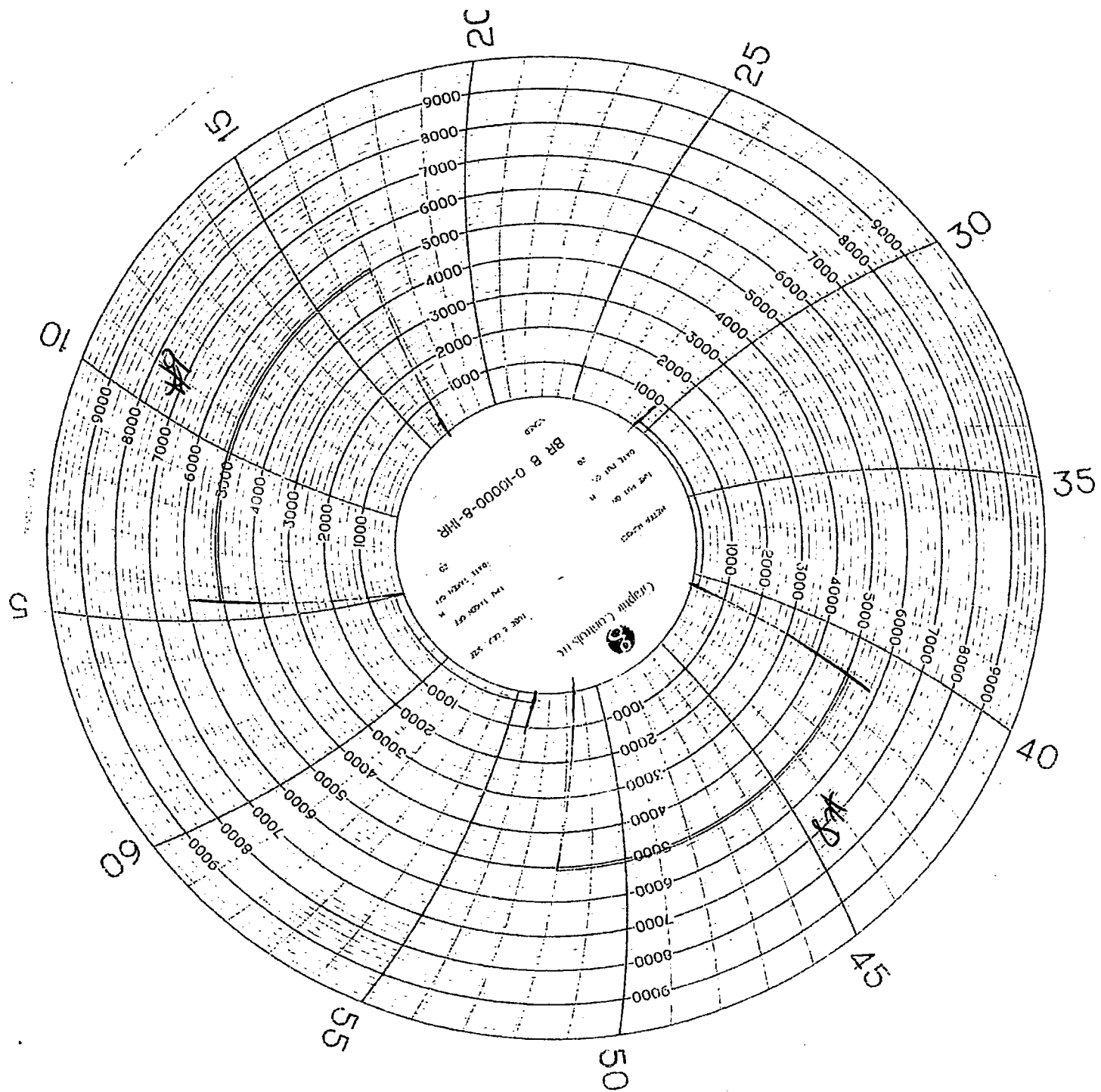
(Instructions on page 2)

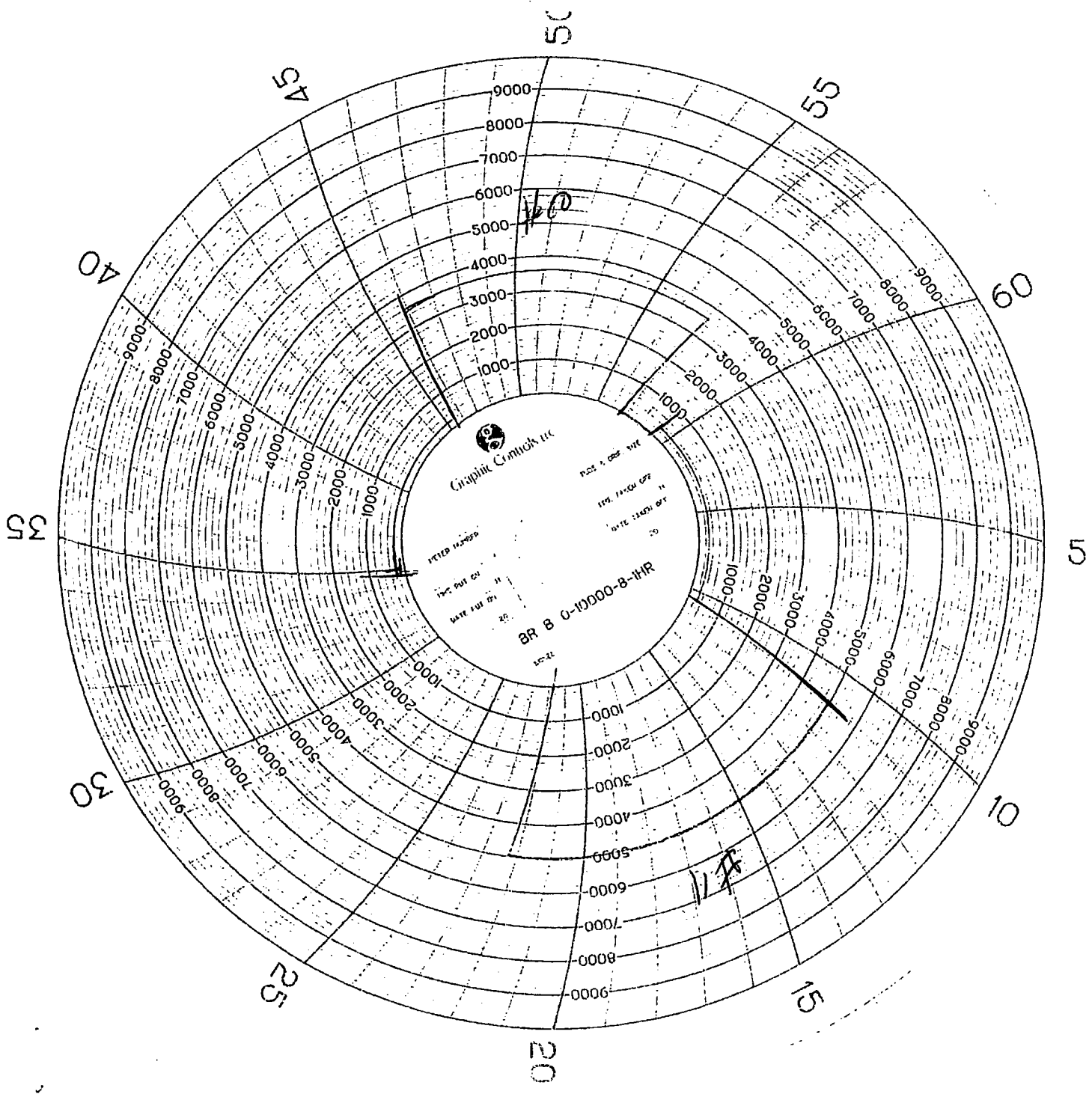
**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

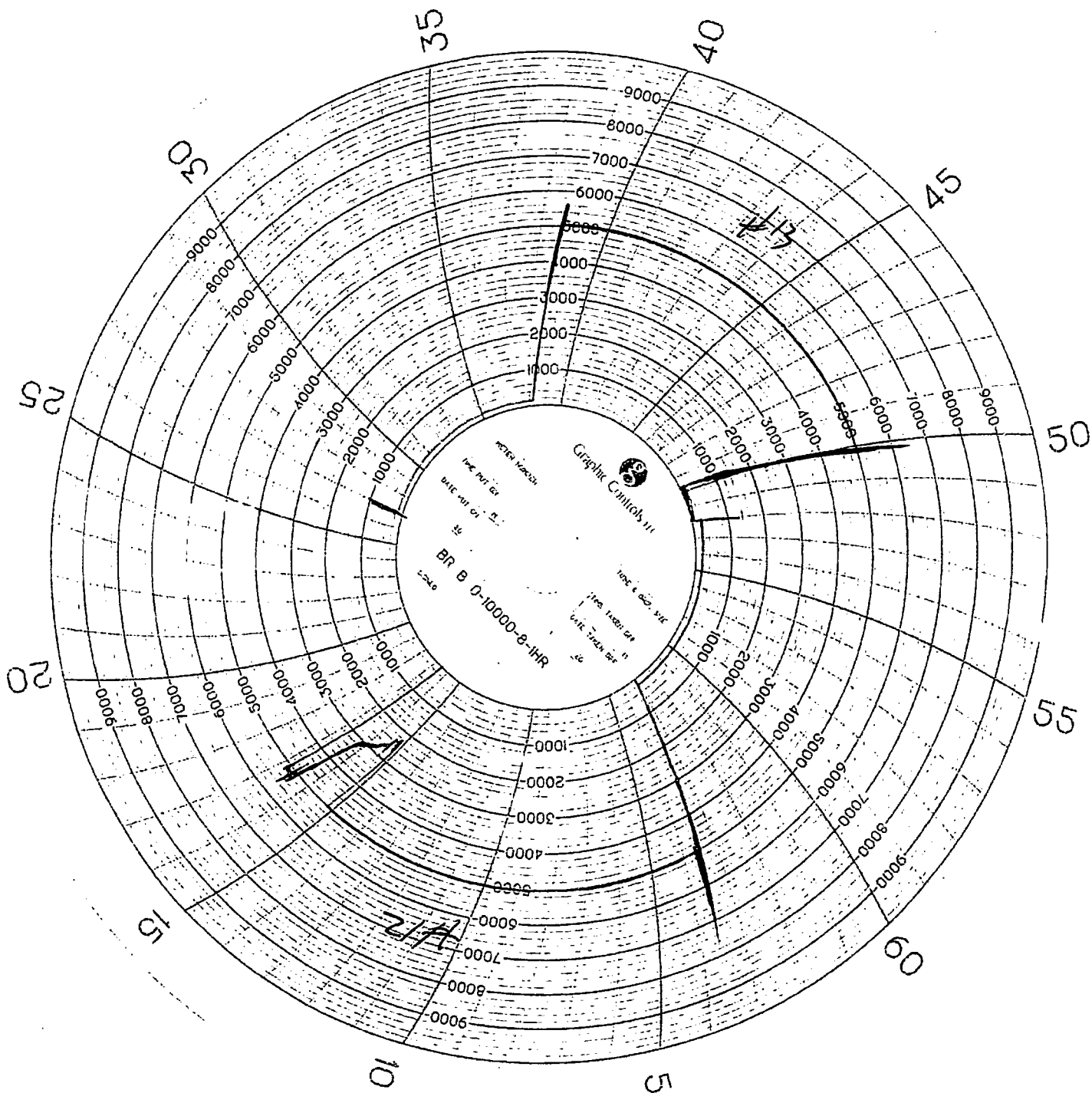


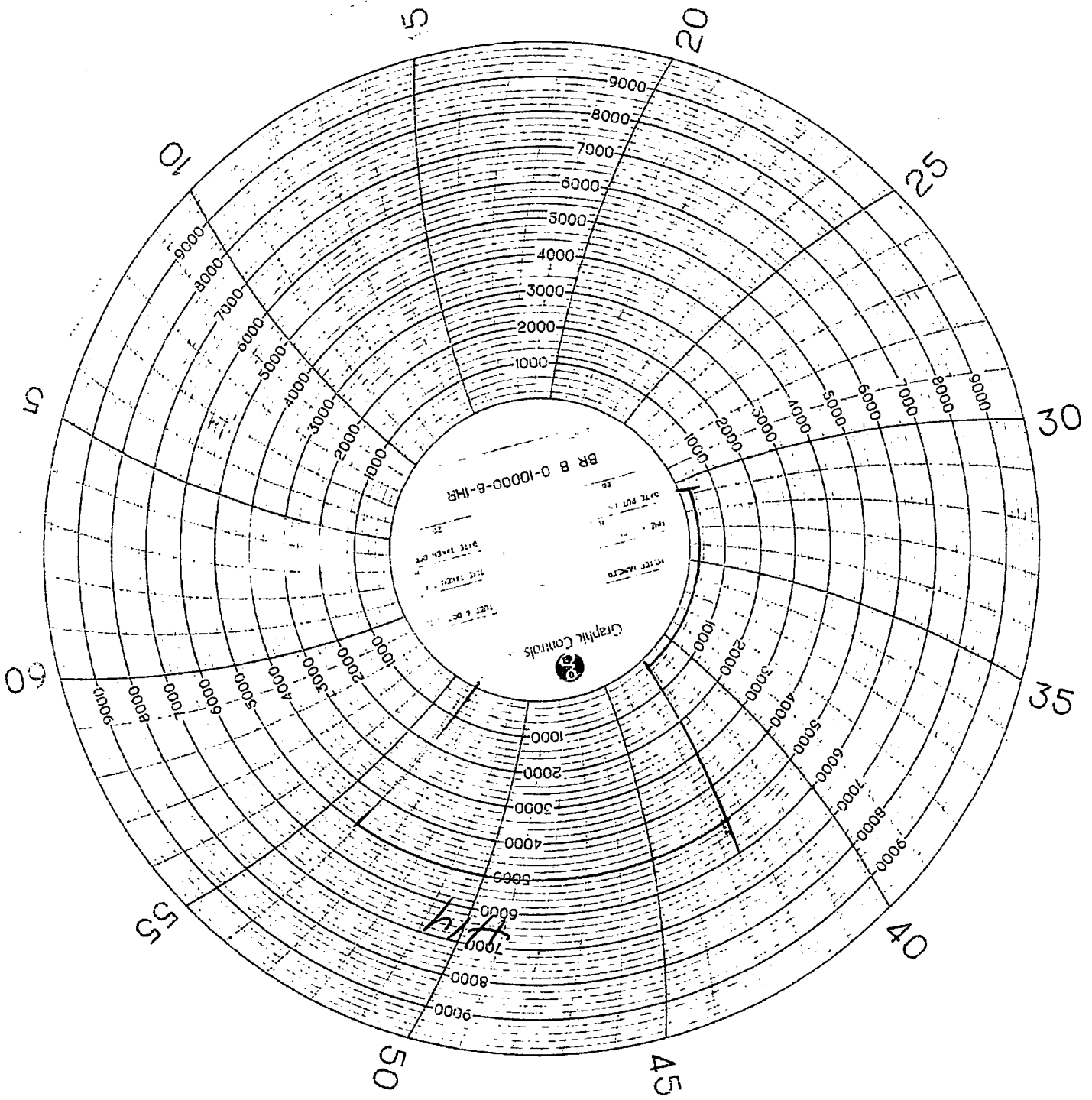












Accumulator Pressure: 100 Manifold Pressure: 150 Annular Pressure: 1400

- 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 1:11:00. 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}



MAN
WELDING SERVICES

WELDING • BOP TESTING
NIPPLE UP SERVICE • BOP LIFTS • TANDEM
MUD AND GAS SEPARATORS
Lovington, NM • 575-398-4549

Pg. _____ of _____

Company: MAN WELDING SERVICES Date: 8/4/11 Invoice # 1010

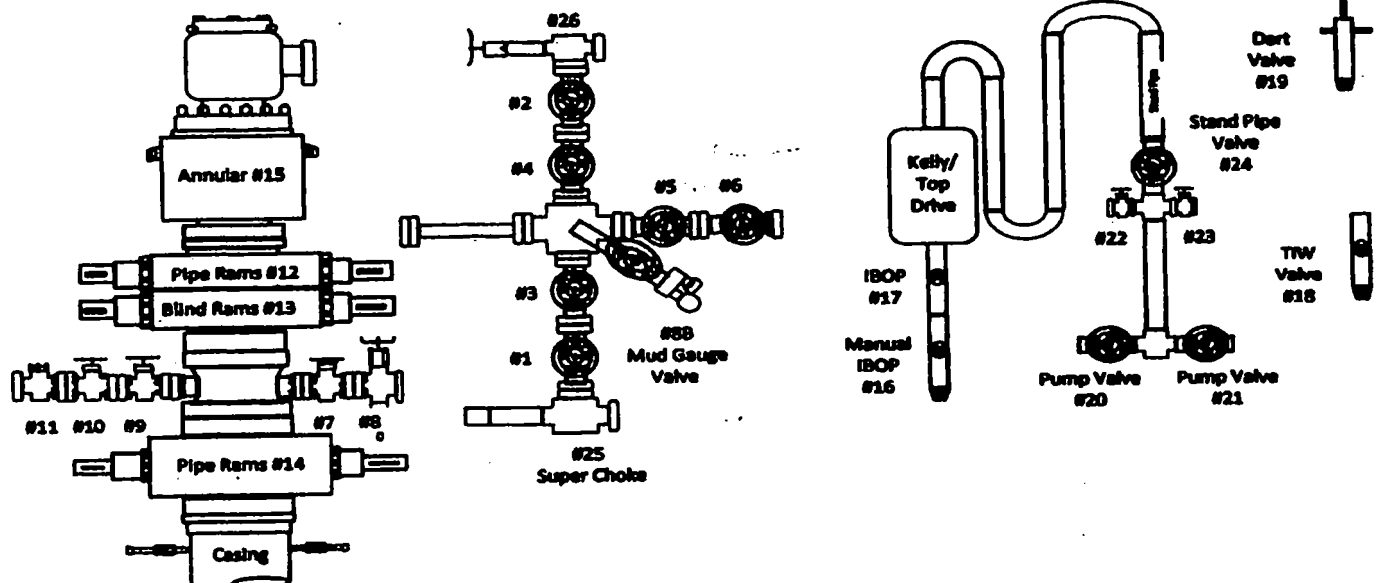
Lease: 10101111111111111111 Drilling Contractor: 10101111111111111111 Rig # 217

Plug Size & Type: 10101111111111111111 Drill Pipe Size: 10101111111111111111 Tester: 10101111111111111111

Required BOP: _____ Installed BOP: _____

*Appropriate Casing Valve Must Be Open During BOP Test *

* Check Valve Must Be Open/Disabled To Test Kill Line Valve *



TEST #	ITEMS TESTED	TEST LENGTH	LOW PSI	HIGH PSI	REMARKS
1	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111
2	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111
3	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111
4	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111
5	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111
6	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111
7	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111
8	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111
9	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111
10	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111
11	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111
12	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111
13	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111
14	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111
15	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111
16	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111
17	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111
18	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111
19	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111
20	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111
21	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111
22	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111
23	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111
24	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111
25	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111
26	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111	10101111111111111111