

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

HOBBSOCD

JAN 22 2015

FORM APPROVED
OMB NO. 1004-0137
Expires: October 31, 2014

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well ☒ Oil Well ☐ Gas Well ☐ Dry ☐ Other
b. Type of Completion: ☐ New Well ☐ Work Over ☐ Deepen ☐ Plug Back ☐ Diff. Resrv.,

Other: _____

2. Name of Operator
Mewbourne Oil Company3. Address
PO Box 5270, Hobbs NM 882413a. Phone No. (include area code)
(575) 393-5905

4. Location of Well (Report location clearly and in accordance with Federal requirements)*

At surface 300 FSL & 330' FEL Unit P

At top prod. interval reported below 1349' FSL & 466' FEL

At total depth 330' FNL & 293' FEL Unit A

14. Date Spudded
01/11/1415. Date T.D. Reached
02/17/1316. Date Completed 03/19/2014
☐ D & A ☒ Ready to Prod.17. Elevations (DF, RKB, RT, GL)*
3652'18. Total Depth: MD 15045'
TVD 10941'19. Plug Back T.D.: MD 15000'
TVD 10942'20. Depth Bridge Plug Set: MD NA
TVD NA21. Type Electric & Other Mechanical Logs Run (Submit copy of each)
GR, CN-D & DLL22. Was well cored? ☒ No ☐ Yes (Submit analysis)
Was DST run? ☒ No ☐ Yes (Submit report)
Directional Survey? ☐ No ☒ Yes (Submit copy)

23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sks. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17 1/2"	13 3/8" J&H	54.5 & 48#	0	1670'		1350	406	Surface	NA
12 1/4"	9 5/8" J55	36#	0	5296'		2255	668	Surface	NA
8 3/4"	7" P110	26#	0	11385'		1450	449	Surface	NA
6 1/8"	4 1/2" P110	13.5#	11115'	15017'	Liner	NA	NA	NA	NA

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
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25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) Bone Spring	8402'	15045'	11448' - 15000' MD	Ports	25	Open
B)			10968' - 10942' TVD			
C)						
D)						

27. Acid, Fracture, Treatment, Cement Squeeze, etc.

Depth Interval	Amount and Type of Material
11448' - 15000'	Frac w/414,175 gals slickwater, carrying 125,860# 100 Mesh, 331,738 gals 20# Linear gel, 1,004,125 20# X-Link gel carrying 2,119,170# 20/40 OptiProp, 471,670# 20/40 OptiProp Resin coated sand.

28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
03/19/14	03/20/14	24 hrs	→	1189	593	1301	45	.707	Flowing
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
15/64"	NA	1250	→	1189	593	1301	499	Producing	

28a. Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
			→						

*(See instructions and spaces for additional data on page 2)

ACCEPTED FOR RECORD

JAN 17 2015

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICERECLAMATION
DUE 9-19-14

JAN 30 2015

28b. Production - Interval C									
Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
			→						

28c. Production - Interval D									
Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
			→						

29. Disposition of Gas (Solid, used for fuel, vented, etc.)

30. Summary of Porous Zones (Include Aquifers):	31. Formation (Log) Markers
<p>Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.</p>	

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth
				Rustler Top of Salt Base of Salt Yates Delaware Bone Spring	1560' 1756' 3237' 3479' 5513' 8402'

32. Additional remarks (include plugging procedure):

33. Indicate which items have been attached by placing a check in the appropriate boxes:

<input checked="" type="checkbox"/> Electrical/Mechanical Logs (1 full set req'd.)	<input type="checkbox"/> Geologic Report	<input type="checkbox"/> DST Report	<input checked="" type="checkbox"/> Directional Survey
<input type="checkbox"/> Sundry Notice for plugging and cement verification	<input type="checkbox"/> Core Analysis	<input checked="" type="checkbox"/> Other: Comp sundry, Dev rpt, C104, Gyro, Final C102, <i>pk r port</i>	

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions)*

Name (please print) Jackie Lathan Title Regulatory

Signature *Jackie Lathan* Date 04/08/14

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.