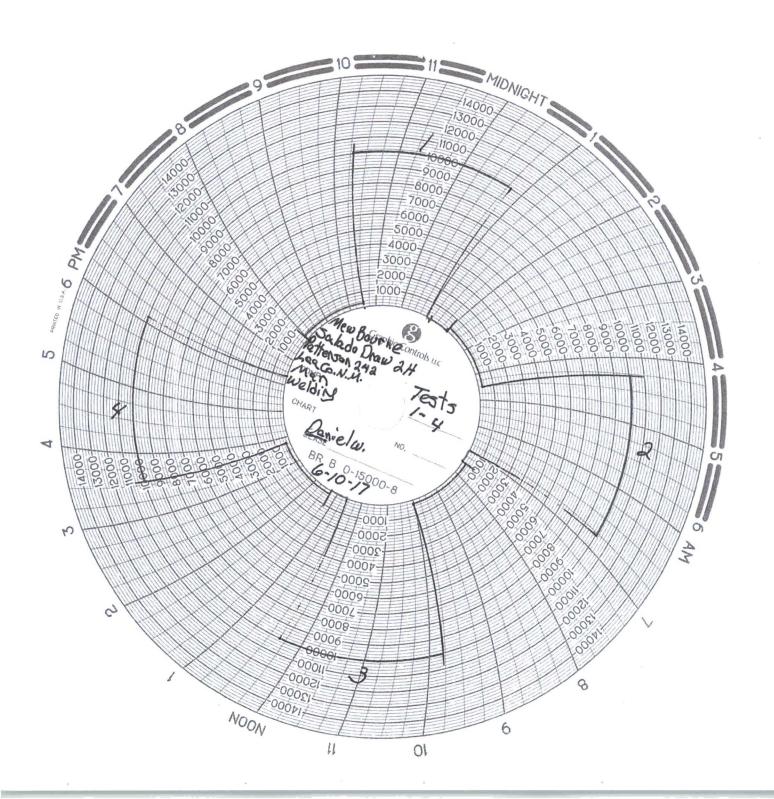
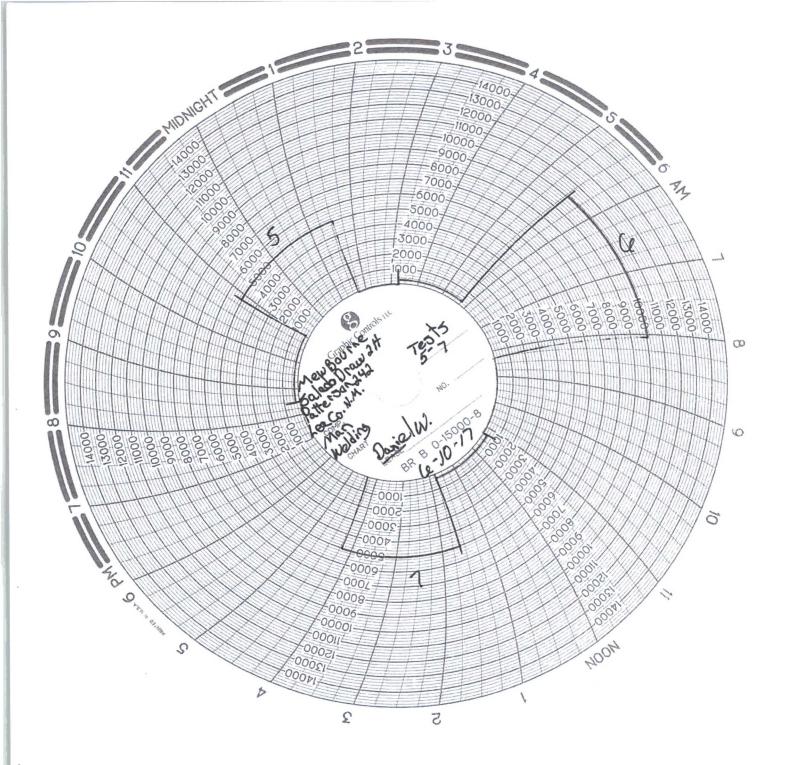
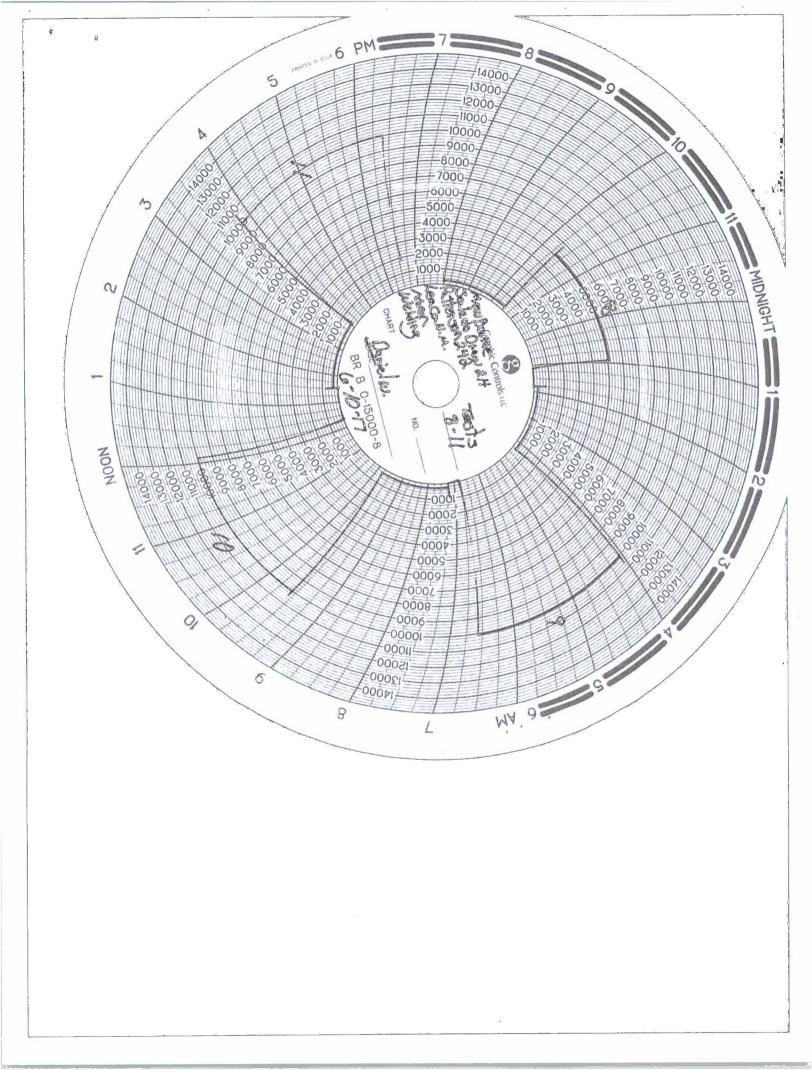
	UNITED STATES PARTMENT OF THE INTERIOR		OMB	M APPROVED NO. 1004-0137 January 31, 2018
	UREAU OF LAND MANAGEMENT NOTICES AND REPORTS ON V	OCD Hob		
Do not use thi	is form for proposals to drill or to II. Use form 3160-3 (APD) for such	re-enter an H	6. If Indian, Allotted	
SUBMIT IN	TRIPLICATE - Other instructions of	on page 2 AU	G 1 4 COT >8. Well Name and N SALADO DRAV 9. API Well No. 30-025-42837 10. Field and Pool of PED LIN C.	reement, Name and/or No.
1. Type of Well Oil Well Gas Well Ott	1PT	REO	20178. Well Name and N SALADO DRAV	o. V 10 W1PA FEDERAL 2H 🖌
2. Name of Operator MEWBOURNE OIL COMPAN	/ Contact: JACKIE L	ATHAN	9. API Well No. 30-025-42837	-00-X1
3a. Address P O BOX 5270 HOBBS, NM 88241		No. (include area code) -393-5905	10. Field and Pool of RED HILLS-B	or Exploratory Area ONE SPRING, NORTH
4. Location of Well (Footage, Sec., 7	., R., M., or Survey Description)		11. County or Parish	n, State
Sec 15 T26S R33E NENE 25	OFNL 530FEL		LEA COUNTY	′, NM
12. CHECK THE AI	PPROPRIATE BOX(ES) TO INDIC	CATE NATURE OF	NOTICE, REPORT, OR OT	THER DATA
TYPE OF SUBMISSION		TYPE OF	ACTION	
D Nation of Intent	🗖 Acidize	Deepen	□ Production (Start/Resume)	□ Water Shut-Off
□ Notice of Intent	Alter Casing	Iydraulic Fracturing	□ Reclamation	U Well Integrity
Subsequent Report	Casing Repair	New Construction	□ Recomplete	Other Wall Snud
Final Abandonment Notice		lug and Abandon	Temporarily Abandon	Well Spud
	Convert to Injection	Plug Back	UWater Disposal	
Ran 1033' of 13 3/8" 54.5# J5 13.5#/g w/1.75 yd. Tailed w/2 A.M. 06/10/17. Circ 200 sks c standpipe & mud lines to the p	g #231 & spud 17 1/2" hole. TD'd h 5 ST&C csg. Cemented with 675 sk 00 sks Class C w/1% CaCl2. Mixed ement to pit. Tested BOPE to 10000 bumps to 5000#. At 4:15 P.M. 06/11 with 12 1/4" bit. FIT test to 10.0 PP0 vide & NMB000919	s Class C w/additive @ 14.8#/g w/1.33 yo # & Annular to 5000 /17, tested csg to 15	d. Plug down @ 1:15)#. Tested	
14. I hereby certify that the foregoing is	s true and correct.			
	Electronic Submission #381101 veri For MEWBOURNE OIL 0	COMPANY. sent to th	e Hobbs	
Con Name(Printed/Typed) JACKIE L	nmitted to AFMSS for processing by F		07/19/2017 (17PP0467SE) RIZED REPRESENTATIVE	
Signature (Electronic	Submission) THIS SPACE FOR FEDE	Date 07/12/20		
	THIS SPACE FOR FEDE			
Approved By ACCEPT	ED			Date 08/04/2017
	d. Approval of this notice does not warrant uitable title to those rights in the subject leas- uct operations thereon.			
Title 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent	U.S.C. Section 1212, make it a crime for an statements or representations as to any matter	y person knowingly and y er within its jurisdiction.	willfully to make to any department	or agency of the United
(Instructions on page 2) ** BLM REV	ISED ** BLM REVISED ** BLM	REVISED ** BLM	REVISED ** BLM REVIS	ED ** //
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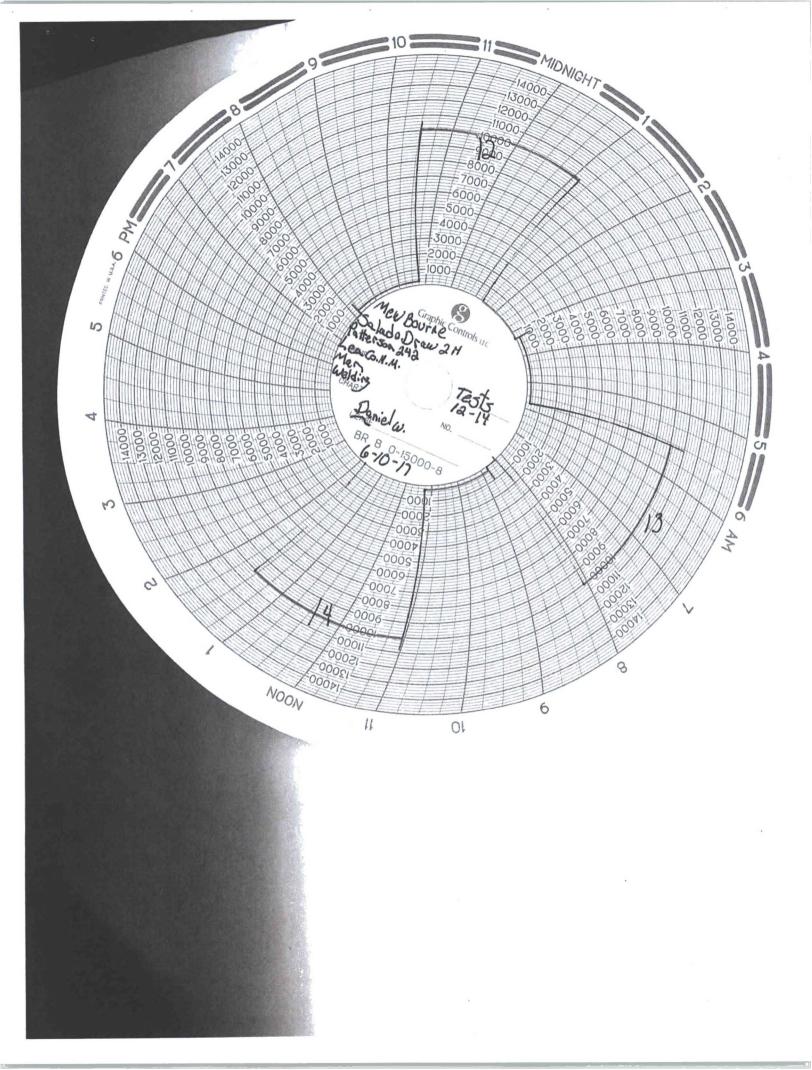


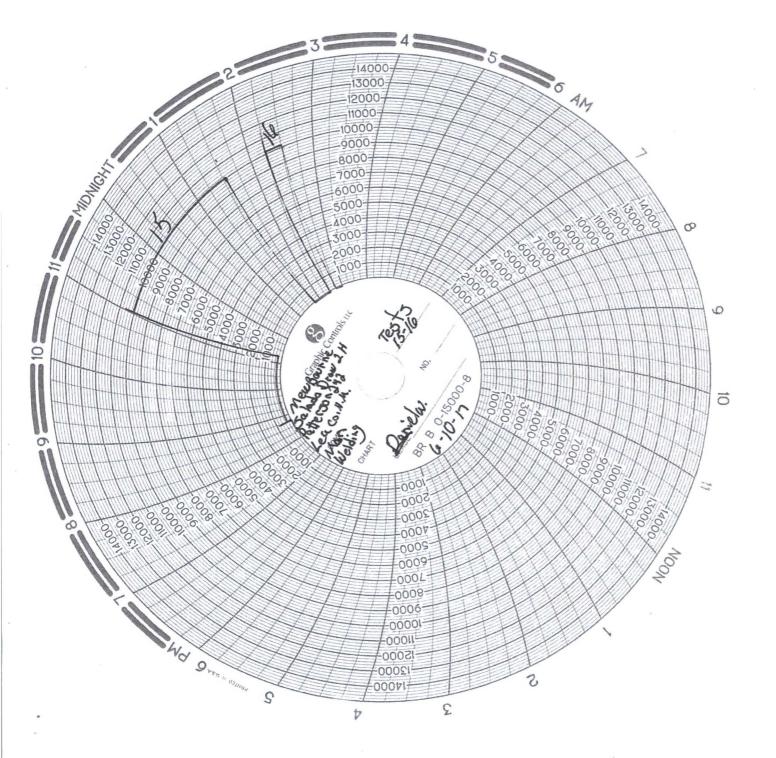
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WELDING . BOP TESTING NIPPLE UP SERVICE • BOP LIFTS • TANDEM MUD AND GAS SEPARATORS WELDING SER Pg. _____ of ____ Lovington, NM • 575-396-4540 Company MemBourne Invoice # 852 Date: so wipaz 6 QU er501 10 Ko Drilling Contractor: Plug Size & Type://2" **Drill Pipe Size** Testerc Required BOP: 10.000 000 Installed BOP: *Appropriate Casing Valve Must Be Open During BOP Test * Check Valve Must Be Open/Disabled To Test Kill Line Valves * WIPA ZIN #26 Dart -CI Valve #19 #2 000000 Stand Pipe Valve Kelly/ #24 #4 Annular #15 Top ð Drive ð M #22 #23 TIW Ĭ Pipe Rams #12 ---þ IBOP Valve #18 #17 B Blind Rams #13 #88 Manual Mud Gauge IBOP Contain Pump Valve Valve Pump Valve #16 #20 #21 #11 #10 #9 #7 #8 #25 Pipe Rams #14 Super Choke Casing TEST # ITEMS TESTED TEST LENGTH LOW PSI HIGH PSI REMARKS is a 2 50 a RR 00 00 1 5000 000 50 121,22.23 1 \mathcal{O} 5000 24 7 G 00 2000 9 1 50 æ 250 10 10 000 2 50 8 000 9 150 0 000 9 50 1 12 000 250 10 250 000 10. 200 MUM tes

	TNIC SED
	MAN WELDING SERVICES, INC.
	AN
	Awipa, H
m	Dany Mew Bourne Date 6-10-17
ase	Salado Draw 2H County Leg N.M.
	ng Contractor Patterson Plug & Drill Pipe Size/2' 4/2IF
	mulator Pressure: 300 Manifold Pressure: 1500 Annular Pressure: 650
	Accumulator Function Test - OO&GO#2
Cł	neck - 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)
	Ensure accumulator is pumped up to working pressure. (Brut off an pumps)
	1. Open HCR Valve. (If applicable)
	2. Close annular.
	 Close all pipe rams. 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)
	 Record remaining pressure 200 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.
-	
Cł	neck - PRECHARGE ON BOTTLES OR SPHERICAL (III.A.2.d.)
0.	
•	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/000 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}
Ch	neck - 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 HCP value (if applicable)
	 Open the HCR valve, {if applicable} Close annular

- With pumps only, time how long it takes to regain the required manifold pressure.
 Record elapsed time: 533ec. 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}