Form 3160 (September 2001)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

5. Lease Serial No.

FORM APPROVED OMB No. 1004-0135 Expires: January 31, 2004

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.				NM-33437 6. If Indian, Allottee or Tribe Name	
1. Type of Well	nd Andrewson meeting on the September of Antonia (September 2011) and a september of the September of the September 2011		RECEIVED	~	
Oil Well Gas Well Other				8. Well Name and No.	
Name of Operator Mewbourne Oil Company 14744			JUN 0 9 2004	Fren 8 Federal #5 and #7 Facility 9. API Well No.	
Mewbourne Oil Company 147 3a. Address	44	3b. Phone No. (incli	- OPPARTES	A .	5-32349 #7=30-015-33091
	.40	· ·	me men concy	<u> </u>	d Pool, or Exploratory Area
PO Box 5270 Hobbs, NM 88240 4. Location of Well (Footage, Sec., T, R., M., or Survey Description)		505-393-5905		Shugart Strawn	
676' FNL & 1381' FWL Sec 8-T		11. County or Parish, State			
				Eddy Cou	
12. CHECK APP	ROPRIATE BOX(ES) TO	INDICATE NAT	URE OF NOTICE, R	EPORT, OR	OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION				
	Acidize	Deepen	Production (Star	t/Resume)	Water Shut-Off
Notice of Intent	Alter Casing	Fracture Treat	Reclamation		Well Integrity
Subsequent Report	Casing Repair	New Construction	Recomplete		Other Notice of written
	Change Plans	Plug and Abandor		andon	order
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal		
Attach the Bond under which the following completion of the invo	e work will be performed or provided operations. If the operation il Abandonment Notices shall be or final inspection.) eived a Notice of Written Orde	vide the Bond No. on f results in a multiple co filed only after all req er dated 04/30/04 for	le with BLM/BIA. Requir mpletion or recompletion in uirements, including recla the above captioned fac	ed subsequent in a new intervent mation, have be cility. The Fre	
racinty makes o produced w	JUN - 8 20 ALEXIS C. SWOB PETROLEUM ENG	RECORD 04	OPERATORS - FOR SUBMIT 1 ORIGINATES	OR SUND	RIES
14. 1 hereby certify that the foregoing Name (PrintedlTyped)	g is true and correct		MOCE		
Kristi Green		Title I	Regulatory Analyst		
Signature Phiste	green		5/20/04		
	THIS SPACE F	a and the second second	STATE OFFICE USE		

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.

Name

(Printed/Typed) Office

Title

Date

Approved by (Signature)

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.