

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Div-Dist. 2  
1301 W. Grand Avenue  
Alamosa NM 88210

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

**SUNDRY NOTICES AND REPORTS ON ABANDONED 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 reverse side**

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

Mewbourne Oil Company 14744

3a. Address

PO Box 5270 Hobbs, NM 88240

3b. Phone No. (include area code)

505-393-5905

4. Location of Well (Footage, Sec., T, R., M., or Survey Description)

660' FNL & 1980' FWL, Unit Letter C of Sec 5-T20S-R28E

Case Serial No.

NM-83581

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.

Burton Flat "5" Federal #5

9. API Well No.

30-015-33426

10. Field and Pool, or Exploratory Area

Burton Flat Morrow

11. County or Parish, State

Eddy County, NM

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

TYPE OF SUBMISSION

TYPE OF ACTION

☐ Notice of Intent

☒ Subsequent Report

☐ Final Abandonment Notice

☐ Acidize

☐ Alter Casing

☐ Casing Repair

☐ Change Plans

☐ Convert to Injection

☐ Deepen

☐ Fracture Treat

☐ New Construction

☐ Plug and Abandon

☐ Plug Back

☐ Production (Start/Resume)

☐ Reclamation

☐ Recomplete

☐ Temporarily Abandon

☐ Water Disposal

☐ Water Shut-Off

☐ Well Integrity

☒ Other Spud & Csg Jobs

3. 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 shall 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 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

06/05/04...MI & spud 17 1/2" hole. TD'd hole @ 468'. Ran 468' 13 3/8" 48# H40 ST&C csg. Cement w/3 sxs GW27 Frac Gel followed by 250 sks BJ Lite "C" w/additives. Mixed @ 12.5 ppg, yield 1.98 cu.ft/sk. Tail w/200 sks Class "C" w/2% CaCl2. Mixed @ 14.8 ppg, yield 1.34 cu.ft/sk. Did not circ cmt. Ran Temp Survey. Found TOC @ 120'. Ran 1" to 120' & cement w/200 sks Class "C" Neat. Mixed @ 14.8 ppg, yield 1.32 cu ft/sk. Circ 50 sks contaminated cement & 10 sks good cement to reserve pit. (BLM field rep notified, but did not witness.) WOC 18 hrs.

06/13/04...TD'd 12 1/4" hole. TD'd hole @ 3018'. Ran 3018' 9 5/8" 40# N80/K55 LT&C csg. Cement w/1000 sks Lite w/6% gel with additives. Mixed @ 12.5 ppg, yield 1.93 cu.ft/sk. Tail w/200 sks Class "C" w/2% CaCl2. Mixed @ 14.8 ppg, yield 1.34 cu.ft/sk. Circ 125 sks smt to pit. WOC 18 hrs.

\*Test BOPE as required. All equipment passed. Charts and schematic attached. Drill out w/ 8 3/4" bit.

14. I hereby certify that the foregoing is true and correct

Name (Printed/Typed)

Kristi Green

Title Hobbs Regulatory

Signature

*Kristi Green*

Date 06/14/04

ACCEPTED FOR RECORD

JUN 22 2004

ALEXIS C. SWOBODA  
PETROLEUM ENGINEER

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved by (Signature)

Name

(Printed/Typed)

Title

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.

Office

Date

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.

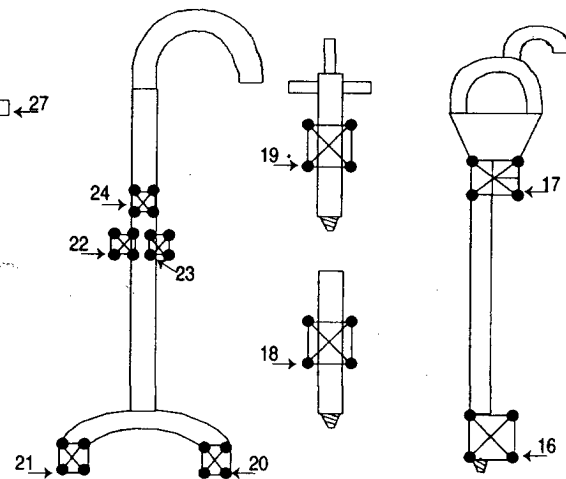
(Continued on next page)

**BUS: 505 396-4540 • FAX: 505 396-0044**



ME B 271.1

Check Valve Open *Yes*



TEST #	ITEMS TESTED	TEST LENGTH	LOW PSI	HIGH PSI	REMARKS
1	25, 26, 6, 9, 13	10		5000	Had to put New
2	1, 2, 5, 10, 13	10		5000	Ring Gasket on Annular
3	3, 4, 5, 9, 13	10		5000	Flange OK.
4	8, 11, 12	10		5000	
5	7, 12, #2 Kill Line	10		5000	
6	7, 11, 15	10		<del>25000</del>	
7	19	10		5000	
8	18	10		5000	
9	16	10		5000	
10	17	10		5000	
					#8 Is HCR Valve.
					#25 Is Super Choke.

Mileage \_\_\_\_\_ @ \_\_\_\_\_

SUB TOTAL 1495.00  
TAX \$ 78.49  
TOTAL 1573.49

Newbourne

6-12-04

Burton 7/10/5 Fed. #3

Eddy, Co.

Patt. 1 TI 47

11" C-22

ASC Rev. 06/02

## Accumulator Function Test - OO&GO#2

### To Check - 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)
1. Open HCR Valve. (If applicable)
  2. Close annular.
  3. Close all pipe rams.
  4. 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).
  6. Record remaining pressure 1450 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.

### To Check - PRECHARGE ON BOTTLES OR SPHERICAL (III.A.2.d.)

- 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 1000 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 }

### To check - 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 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 1:32 sec. 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 }

*Handwritten signature: J. C. Latham*

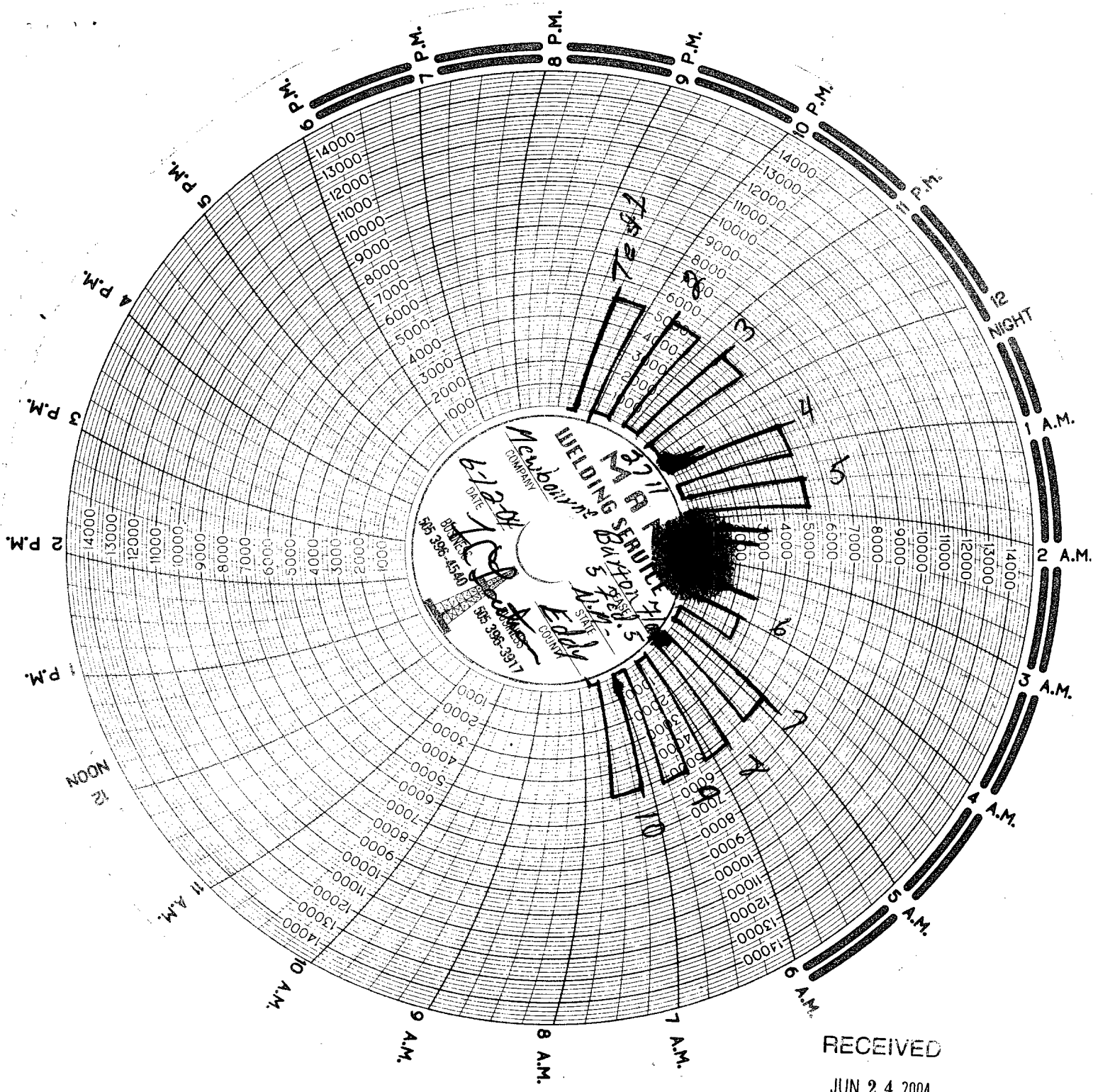
Accumulator working pressure rating	Minimum acceptable operating pressure	Desired precharge pressure	Maximum acceptable precharge pressure	Minimum acceptable precharge pressure
1,500 psi	1,500 psi	750 psi	800 psi	700 psi
2,000 psi	2,000 psi	1,000 psi	1,100 psi	900 psi
3,000 psi	3,000 psi	1,000 psi	1,100 psi	900 psi

**SPECIALIZING IN NEW AND EXPERIENCED EQUIPMENT  
VALVE AND CHOKE REPAIR**

24880

QUANTITY ORDERED		UNIT PRICE	AMOUNT
	Hire labor (minimum) to inspect overall operation of closing unit & check pre-charge or accumulator spheres & fill to 1100PSI ① Nitrogen		
1	Bottle nitrogen		
164	miles round trip		
	(900 + 20 = 1100)		
	(1100)		
		TOTAL	

**1 1/2 % Per Month added to All Past Due Accounts.**



RECEIVED  
JUN 24 2004  
OCD-ARTERIA