Form 3160-5 (September 2001)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

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

5. Lease Serial No.

NM-14768-A	
6. If Indian, Allottee or Tribe Name	

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter are abandoned well. Use Form 3160-3 (APD) for such proposals.
abandoned well. Use Form 3100-3 (AFD) for Such proposals.

			<u></u>					
SUBMIT IN TR	RIPLICATE - Other instruc	tions on reverse s	de 7. 1	f Unit or CA	/Agreement, l	Name and/or No.		
. Type of Well								
Oil Well Gas Well Other					8. Well Name and No.			
2. Name of Operator					Otis 35 Federal Com #2			
Mewbourne Oil Company 14744 3a. Address 3b. Phone No. (include area code)					9. API Well No.			
a. Address	· · · · · · · · · · · · · · · · · · ·	30-015-33767 10. Field and Pool, or Exploratory Area						
PO Box 5270 Hobbs, NM 88		505-393-5905	1		Morrow 739	-		
. Location of Well (Footage, Sec.	, T, R., M., or Survey Description)		\- 	County or P		720		
660' FSL & 660' FWL, Sec 35-	T21S-R27E Unit Letter M		 E	ddy Co NM	Í			
12. CHECK AP	PROPRIATE BOX(ES) TO I	NDICATE NATURE				ГА		
TYPE OF SUBMISSION		TYPE	OF ACTION					
Notice of Intent Subsequent Report	Acidize Alter Casing Casing Repair	Deepen Fracture Treat New Construction	Production (Start/Results) Reclamation Recomplete	ime) 🔲	Water Shut- Well Integri Other exte	ty		
	Change Plans	Plug and Abandon	Temporarily Abandor	1				
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal					
Mewbourne Oil Company receivate any questions, please call 5	ved an approved APD for the above 105-393-5905.	e captioned well on 12/	03/04. MOC would like	to extend t	he APD for 1	l year. If you		
		ECEIVED	APPROVED F ENDHING	OR 12.1	MONTH PI	erjo d		
		J-ANTESIA	ENDING	1411				
See altached								
14. I hereby certify that the foregoi Name (PrintedlTyped)	ng is true and correct	1						
Kristi Green		Title Hobb	s Regulatory					
Signature Audt	: Glen	Date 12/01	/05					
	THIS SPACE FOR	REDERALORISTA	TE OFFICE USE		aparental Communication			
Approved by (Signature)	/s/ Joe G. Lare	Name (Printe	″ Joe G. Lara	Ti	etroleu	ım Engin		
Conditions of approval, if any, are certify that the applicant holds leg which would entitle the applicant to	e attached. Approval of this notice d	oes not warrant or Offic	ee	O OFFI	Date CE	JAN 17		

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.