

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010**SUNDRY NOTICES AND REPORTS ON 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.*5. Lease Serial No.
NMNM11038

6. If Indian, Allottee or Tribe Name

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

SUBMIT IN TRIPLICATE - Other instructions on reverse side.8. Well Name and No.
FULLER 14 FEDERAL SWD 1

1. Type of Well

☐ Oil Well ☐ Gas Well ☒ Other: INJECTION2. Name of Operator
MEWBOURNE OIL COMPANYContact: JACKIE LATHAN
E-Mail: jlathan@mewbourne.com9. API Well No.
30-015-436303a. Address
PO BOX 5270
HOBBS, NM 882413b. Phone No. (include area code)
Ph: 575-393-590510. Field and Pool, or Exploratory
DEVONIAN; SWD4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 14 T26S R29E Mer NMP NWSW 2301FSL 2533FEL11. County or Parish, and State
EDDY COUNTY, NM**12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Drilling Operations
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. 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 recomplete 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 recompletion 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.)

07/02/16 TD well @ 16540'. ND BOPE & install capping flange.

Rig released to move @ 10:00 P.M. 07/03/16.

Bond on file: NM1693 nationwide & NMB000919

Bond on file: 22015694 nationwide & 022041703 Statewide

NM OIL CONSERVATION
ARTESIA DISTRICT

AUG 22 2016

RECEIVED

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

Electronic Submission #344341 verified by the BLM Well Information System
For MEWBOURNE OIL COMPANY, sent to the Carlsbad
Committed to AFMSS for processing by PAUL SWARTZ on 07/11/2016 ()

Name (Printed/Typed) JACKIE LATHAN

Title AUTHORIZED REPRESENTATIVE

Signature (Electronic Submission)

Date 07/11/2016

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

Title

JUL 19 2016

Date

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

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 any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED **