NOL ENT

OCD-ARTESIA

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

5. Lease Serial No.

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.

NM-14758	
6. If Indian, Allottee or Tribe Name	

SUBMIT IN TRIPLICATE - Other instructions on reverse side				7. If Unit or CA	Agreement, Name and/or No
1. Type of Well	1 ou			0. 117-11 No	4 NI-
	Other			8 Well Name and No.	
Name of Operator Mewbourne Oil Company 14	744			9. API Well No	Sederal Com #1
3a. Address	7-1-	3b. Phone No.	mile area code)		
	2.40]	0000	30-015-35599 10. Field and Pool, or Exploratory Area	
PO Box 5270 Hobbs, NM 88 4. Location of Well (Footage, Sec.,		505-393-5905		Cemetary Morrow 74640	
4. Location of Well (Pootage, Sec.,	1, R., M., or Survey Description)		11. County or Parish, State		
1980' FNL & 1900' FWL Uni	t F Sec 4-T20S-R25E	AUG	0 9 2007	Eddy County, NM	
12. CHECK AP	PROPRIATE BOX(ES) TO	INDICATEMALI	URE OF NOTICE, RI	EPORT, OR O	THER DATA
TYPE OF SUBMISSION	,		TYPE OF ACTION	······································	
	Acidize	Deepen	Production (Start	(Resume)	Water Shut-Off
Notice of Intent	Alter Casing	Fracture Treat	Reclamation		Well Integrity
Subsequent Report	Casing Repair	New Construction	n Recomplete	$\overline{\square}$	Other Spud & csg
Subsequent Report	Change Plans	Plug and Abando	n Temporarily Aba	ndon —	 -
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal		
sks Class C with 2% CaCl2. Mi	ole. Lost total returns at 158'. D 6 #/g w/ 1.52 yd. Followed with xed @ 14.8 #/g w/ 1.34 yd. Ran 00# and annular to 1500#. At 7:	h 300 sks BJ Lite C n Temp Survey. TO	lass C with additives. M DC at 235'Ran 1" pipe 8 sted csg-to"1500# for 30 p	ixed @ 12.5 #/g comement in 73 mins. Test form	w/ 1 96 yd Tail with 400 stages with 225 sks cmt. ation to 12:5 EMW. Chart
14. 1 hereby certify that the foregoin Name (PrintedlTyped)	g is true and correct	1		, 54 C	A Secretary of States of States and States a
Kristi Green		Title	Hobbs Regulatory		
Kristi Green Title Hobbs Regulatory					
Signature TYM	te guen	Date	07/10/07		
	V THIS SPACE FO	R FEDERAL OR	STATE OFFICE USE		
Approved by (Signature)			Name (Printed/Typed)	Title	e
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		Date
Title 18 U.S.C. Section 1001 and Tit States any false, fictitious or fraudule	le 43 U S C. Section 1212, make it nt statements or representations as to	a crime for any person o any matter within its	on knowingly and willfully to s jurisdiction.	make to any dep	artment or agency of the United

WELDING SERVICES, INC. P.O. Box 1541 • Lovington; N:M. 88260 BUS: 505 396-4540 • FAX: 505 396-0044

INVOICE SEB 7094

	Compan	Mewbourne			Ďatè <i>6</i>	-30-07	Start Time_クご	3 0 □ am 🗗 pm
	Lease =	Mewbourne Fast Dyan 4	70d. 6	on 72			County <u>& d d</u>	State No M
	Company						,	/
	Wellhead	Vendor			_ Tester_ <i>Z</i>	KM Y	omticet.	
	Drlg. Cor	itractor Patterson	UTI				Rig #	<u> 4 B</u>
	Tool Pusl					T-I-MANAGE TO THE STATE OF THE		
	Plug Type	C-22		PI	ug Size <u>/</u>	<i>J</i> "	Drill Pipe Size 4	QXH_
	Casing V	alve Opened <u>405</u>			·	Check Valve Open	405	
Check Va		RAMS 12 Pipe RAMS 13 RAMS 14	3 1	Rotating	l Head	24 22 23	19	15
	TEST #	9 10 7 8 ITEMS TESTED	25	LOW PSI	HIGH PSI	21	20 REMARKS	← 10
	1	25,26,6,9,12	//)	LOW F3I	3000	H.D	to tigl	+ 02
	~~		16		3000	NIC	1	
	3	1,2,5,10,12	10		i .	MISC.	7/unges.	UM V
	2	3,4,5,10,12	10		3000			
	7	8 11, 13	10		3000			
	5	7,11,13:	10		3000			
	6	7,11,15	10		1500			
		19	10		3000			
	8	18	10		3000			
	9	16	10		3000			
	10	17	10		3000			
ĺ								
		Jan Colon	1					
		Land All All	1	1				
		January Contraction of the second	1/1/1	1.		****		
-		1 0	101/					
-								
L								

B HR@ 1000.00 HR@ 7000.00 Mileage 180 @ 129 = 780.00 SUB TOTAL 180.
TAX

MAN WELDING SERVICES, INC.

Company Mewbourne	_Date6-36-67
Lease Fast Draw 4 Fed. Con.	County Eddy
Drilling Contractor Path, #48	Plug & Drill Pipe Size // "C-22/4/2014

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 1850 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 1:39. 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}